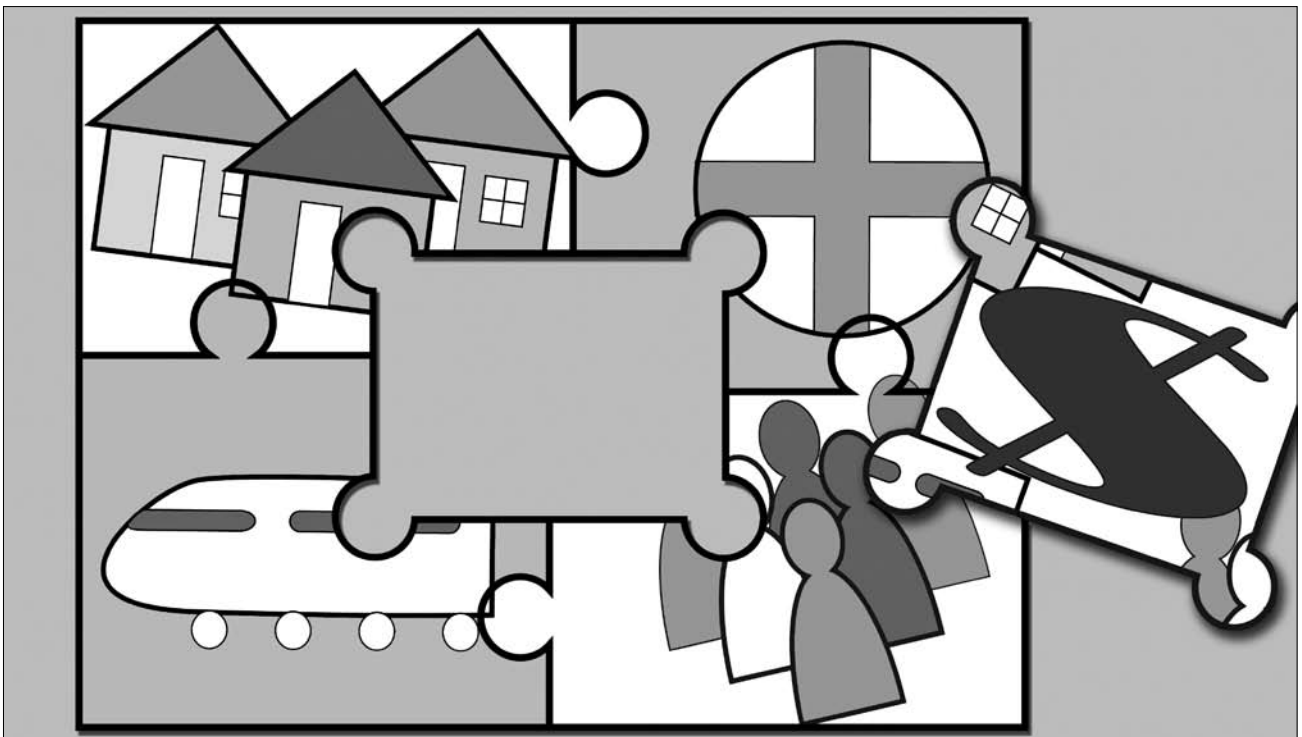


Towards Triple A Rated Community Services

*Social and economic priorities for a fair and sustainable
community: 2009-2010 State Budget*



*Submission to the New South Wales Government by
the Council of Social Service of New South Wales*





The Council of Social Service of New South Wales (NCOSS) is the peak body for the social and community services sector in New South Wales. NCOSS works with its members on behalf of disadvantaged people and communities towards achieving social justice in New South Wales.

NCOSS was established in 1935 to promote cooperation in the provision of community services and influence social legislation. Today our constituents are:

- our members
- other peak community service agencies in NSW
- service providers
- other agencies working in the social policy and social services field
- individual members interested in social policy and social service issues
- disadvantaged and low income people and communities in NSW.

NCOSS provides an independent voice on welfare policy issues and social and economic reforms and is the major co-ordinator for non-government

social and community services in NSW.

We act as a channel for consultation with government and between parts of the non-government sector with common interests and diverse functions.

NCOSS is a membership organisation. Through current membership forums, NCOSS represents more than 7,000 NSW social and community services and over 100,000 consumers and individuals. Members range from the smallest community services to the largest major welfare agencies, state and regional level peak councils, churches, hospitals, local government and consumer groups.

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Introduction

“Mr Speaker, challenging economic times also demand that governments target areas of most need.”

**Former Treasurer Michael Costa,
2008-09 Budget Speech, 3 June 2008**

In June this year, the NSW Government delivered a budget it said would ensure improved front line services and greater investment in infrastructure while continuing to provide strong financial management. Three months later we were told that the economic circumstances had changed so much that there would need to be a mini budget to rein in capital costs and that all areas of the current budget would need to be reviewed.

It is in this context that the NCOSS Pre Budget Submission (PBS) for 2009 – 2010 has been published, although the work began many months earlier and the document was completed before the mini budget was announced. While this might seem an incredibly difficult environment for the community services sector to be seeking greater investment in priorities and programs that matter to us, it is a responsibility that we must all take on.

Because we all want a society in which everyone can participate, where people feel safe and where they get a fair go.

This can only happen if governments invest in both social and physical infrastructure and pay particular attention to the needs of those on low incomes and who are disadvantaged. Such investment builds confidence and resilience and is vital if we, collectively, are to flourish and prosper.

The recommendations NCOSS is making to the NSW Government for the 2009 – 2010 State Budget will make a difference to the lives of individuals, their families and communities that are most in need of support. These people have been overlooked for too long and it is time that this is redressed in a real, meaningful way that focuses on long term sustainable improvements rather than short term politics.

As always, the NCOSS PBS is the product of the collaborative efforts of many people in the community services sector who willingly give their time, knowledge, expertise and opinions. I wish to acknowledge and thank you all for your contributions. It is also a reflection of many hours of consultation, research and development by the NCOSS staff. Their work has been outstanding and has produced a suite of recommendations, backed by rigorous and robust argument, that reflect our priorities for Government in delivering better results for the people of NSW.

While the production of this document has involved the hard work of many, the process does not end with its publication. It is up to all of us who care about the society we live in and who wants to see a strong and fair NSW to use the PBS to advocate for the commitment of resources in the next State Budget to deliver programs and services that will make a positive difference for disadvantaged people, families and communities. We must do this to ensure a better life, with greater opportunities, for these people who we work with and on behalf of.

In this PBS, we are calling on Government to give human and social services the same priority it gives its financial standing with credit rating agencies. That’s why its now time for investment in triple A rated services.

Alison Peters
NCOSS Director
October 2008

NCOSS priorities for Government expenditure

■ Attorney General's Department

■ Recommendation 1: A Charter of Human Rights in NSW

State Plan Priorities: R2, R4, S1, F1, F2, F4

Results

A NSW Charter of Rights could help guarantee the human rights of the people of NSW and ensure that all NSW laws and policies are consistent with these rights. It would:

- Protect the fundamental human rights of all members of the NSW community;
- Complement our democratic system by protecting the very rights and values that underpin it;
- Bring all our human rights into one easy to find law;
- Ensure that the practices of the NSW Government and public authorities are consistent with human rights; and
- Ensure that laws are interpreted and applied in line with human rights.

Evidence/Rationale

International human rights standards are a set of values and guidelines that governments around the

world have all agreed are essential for everyone to live with dignity and respect – no matter whom they are or where they live. Human rights are about the fair treatment of individuals. They are a means of promoting social justice, especially for people who have experienced long-term disadvantage such as Aboriginal and Torres Strait Island peoples.

However, Australia is the only western nation without a national Bill of Rights. Both Victoria and the ACT conducted widespread public consultations which resulted in the development of Charters of Human Rights within their jurisdictions. Tasmania and Western Australia are also considering the development of Charters of Human Rights. Recently the Australian Government also announced a consultation process for the development of a Charter of Human Rights for Australia – but this Charter may only apply to Federal laws.

Although some rights are protected by equal opportunity and anti-discrimination laws these laws are patchy and do not cover many areas of rights. For example anti-discrimination legislation only addresses one form of discrimination at a time, such as discrimination based on race or disability. This approach does not recognise that people can be discriminated against on the basis of the combination of their race, sex, disability etc.¹ There are many other rights that are not protected such as the right to vote and freedom of expression.

It can also be argued that a charter of rights could embellish the scrutiny of legislation process in a number of ways, especially at earlier stages in the legislative process by requiring compatibility statements to be made to Parliament and by other means. The policy process could also be influenced by the growth of a 'rights culture', as a new awareness of rights related issues develops in the public service and by more formal means, such as the making of guidelines for policy formulation.²

Human Rights belong to all people. A Charter of Human Rights is a form of democratic insurance that helps to keep the Government accountable.

Action

A widespread community consultation and education process on how best to protect and promote human rights. This would include whether or not NSW should adopt a Charter of Human Rights and if so what the Charter of Human Rights should include and how it would work.

Cost: **\$800,000 in 2009-10 and 2010-11**

■ Cross Agency Recommendations

■ Recommendation 1: Department of Community Services, Department of Housing, Department of Education and Training and NSW Health

► *Guarantee for Kids in Care*

State Plan Priorities: F3, F4, P4, S1, S4, S5

Result

Improved long term outcomes - including health, education, and employment, as well as personal - for children and young people in and leaving the care system.

Evidence/Rationale

As at December 2006, there were 11,639 children and young people in out of home care. Various studies, many now some years old, have looked at outcomes for children and young people in care, and come up with concerning findings. They include:

- Low completion rates for the HSC;
- Poor health; and
- Disproportionate links between care backgrounds and involvement with juvenile justice and homelessness.³

The responsibility for the welfare and wellbeing of children and young people in out of home care lies with the State Government and while the primary responsibility rests with the Department of Community Services, other government agencies have a role to play.

NCOSS, as a member of the *Every Kid* coalition, believes that the Government should commit to a *Guarantee for Kids in Care*. A Guarantee would build on the Charter of Rights within the *Children and Young Persons (Care and Protection) Act 1998* and acknowledge that if the State is to fulfil its role as a good parent then it must provide those things that the community expects a good parent to provide, up to the age of 25. These are:

- high quality education;
- good health outcomes;
- supported transition to independence (housing; further education and/or employment); and
- support to pursue opportunities and interests.

NCOSS notes that some of these things have been taken up more purposefully over the past two years, including improved health assessments for children entering care, and trials in the Hunter for the provision of housing to young people leaving care. They are a start. There is a need to build on the work currently being undertaken, particularly in relation to health and education.

We are particularly concerned that the pilot clinic at Sydney hospital which has identified significant health needs for children entering care and ongoing medical treatment and support, has been forced to rely on funding raised through the Sydney Hospital Foundation.⁴ These charitable dollars are not guaranteed and may be time limited depending on other priorities identified by the Foundation.

Actions

- Collection of data specific to children and young people in care relating to educational outcomes such as standardised test scores in years 3, 5, 7 and 9 and school retention to years 10 and 12. This data should assist in identifying the educational supports needed by children and young people in care. This measure can be implemented within existing resources.
- Permanent funding for an Out of Home Care Health Clinic located at Sydney Children's Hospital (currently dependent on charity funding) and assessment of the need for a second Clinic at Westmead. This measure totals \$425,000 recurrent.
- Extension of the Hunter housing model.

Cost: **\$425,000 plus housing to be costed**

■ Recommendation 2: Department of Community Services & Housing NSW

► Improving services for people who are homeless

State Plan Priorities: E6, F3, R2

NCOSS believes that improving outcomes for people who are homeless must become a separate priority item in the State Plan.

Results

The development of a more integrated homelessness service system for NSW, including:

- developing new service models;
- filling identified gaps; and
- placing existing crisis accommodation services on a more sustainable footing.

Evidence/Rationale

Currently there are three separate programs that deal with services for people who are homeless in NSW. The Supported Accommodation Assistance Program (SAAP) aims to assist people who are homeless or at risk of becoming homeless to achieve the maximum possible degree of self-reliance and independence by providing transitional supported accommodation and a range of related support services. The Partnership Against Homelessness (PAH) brings together 12 state government agencies with the aim of improving services for people who are homeless and funds some specialised services in the Inner City and Hunter regions. The Crisis Accommodation Program (CAP) provides funding for the acquisition of dwellings for accommodation services. The Department of Community Services (DoCS) manages SAAP while the Department of Housing (DOH) manages CAP and is the lead agency for the PAH.

Deficiencies in the current homelessness service system were identified in the national evaluation of SAAP IV, the 2007 report of the NSW Auditor General, the recent report of the National Youth Commission Inquiry into Youth Homelessness and the Federal Government's Green Paper.

The national evaluation of SAAP IV said that if progress was to be made on expanding service capacity and implementing new ways of working, as well as sustaining service viability, then the level of additional funding required would be of the order of 35 to 40%.⁵ The resulting SAAP V agreement, which runs until June 2010, failed to provide for these requirements.

The Auditor General's report concluded that it is difficult to determine how well the NSW Government is responding to homelessness state-wide because

The National Youth Commission concluded that youth homelessness is worse in 2008 than it was 20 years ago...

there are no performance measures or targets in place.⁶ It recommended that the Government develop a state-wide framework that outlines its response to homelessness with a clear focus on the results it wants to achieve. It further recommended:

- linking this framework to the NSW State Plan;
- a public annual report of key activities and results;
- involving government agencies who are not members of the current Partnership Against Homelessness;
- the establishment of a means to benchmark the state's performance and spread best practice;
- changes to planning arrangements for homeless services; and
- measures to improve access by homeless people to health and justice services.

The NSW Government has yet to finalise its response to these findings and recommendations.

The National Youth Commission concluded that youth homelessness is worse in 2008 than it was 20 years ago and proposed a roadmap of 10 essential strategic actions to overcome the problem.⁷

The Federal Government's Green Paper argued that our response to homelessness needs to be improved, and that this required national commitment, strong leadership, and shared responsibility.⁸ Following consultations on the Green Paper, the Federal Government is expected to release its White Paper on Homelessness in late September 2008.

Actions

- Develop a comprehensive and integrated NSW Homelessness Strategy to ensure a better coordinated response to homelessness.

Being homeless is a complex issue, created by the failure of a variety of service systems. Homeless people and those at risk of becoming homeless are affected by common themes that include social exclusion, an ineffective service system, lack of access to housing that is affordable to people on low incomes and a lack of support and supported accommodation services.

This range of factors means a multi-dimensional integrated response is required to homelessness. NCOSS has joined with the three NSW SAAP peaks to call for a ten year NSW Homelessness Strategy that would coordinate key Departmental and NGO partners in the development of an integrated approach to assisting homeless people and those at risk of becoming homeless.⁹ Such an approach would better ensure that the service system encompasses the full spectrum of required interventions, from prevention to early intervention to crisis support and post-crisis follow up. There would be a particular emphasis on strengthening links with necessary housing and support services provided by the mainstream service system.

- Establish a fund to develop new service models, fill identified gaps and place existing services on a more sustainable footing.

For the last few years base funding for homeless services has been static and there has been no real opportunity to fund new services or expand existing services. We have reached the stage where a business as usual approach can no longer be sustained. There are too many gaps in the service system, too few places to meet demand, and too many services are expected to operate year after year under inadequate funding formulae.

Additional resources must be provided to all funding streams to enable new service models to be developed, for identified service gaps for particular client groups and geographical areas to be addressed, and for services to be placed on a more sustainable financial basis. The Federal Government has signalled its interest in providing national leadership in combating homelessness. The NSW Government must seize the opportunity presented by this development to partner with the Commonwealth to improve the homelessness service system in this state.

Cost: **\$30m in 2009-10**

■ Department of Ageing, Disability and Home Care

■ Recommendation 1: Home and Community Care

State Plan Priorities: F1, F4

Results

- In the Home & Community Care Program (HACC), NSW has greater capacity to meet the needs of frail older people, people with disability and their carers within reasonable timeframes and without waiting until high cost crisis.
- Equitable delivery of community care and disability services to Aboriginal and Torres Strait Islander people.
- Service providers secure ongoing viability of service provision in real terms.
- New services are developed to meet greater and evolving needs and to deliver on more flexible support responses.
- Aligns with the *Towards 2030: planning for our changing population* strategic outcome of "Providing quality care and support".

Evidence/Rationale

Community care services are a critical support mechanism for people wanting to remain at home within the community, especially for those with little access to the support of family and friends. The NSW Government estimates that the general population will grow 8% between the years 2000 and 2011 but the number of people aged 65+ years will increase by 26% during that time and the number of people with disability will grow 18%.¹⁰

In the Productivity Commission Report on Government Services 2008, NSW reported one of the lowest numbers of HACC services received per thousand people in the HACC population and remains significantly lower than the national average and Victoria, even when adjusted for a perfect data return rate. Similarly, using Productivity Commission tables and adjusted data return rates, NCOSS estimates that NSW provides to around 29% of the national HACC population. However, the NSW proportion of Australia's population is approximately one third, so NSW is falling behind in its share of HACC clients. National comparisons show that fewer eligible people are receiving HACC services in NSW and of those who do, they generally receive less service.

The lifespan of Aboriginal people is still 17 years lower than the general population and in HACC, this is exacerbated by the Australian Institute of Health

and Welfare finding that the incidence of severe disability within the Aboriginal community is 2.4 times greater than the general population.¹¹ The NSW Aboriginal Community Care Gathering Committee comprises nominated Aboriginal and Torres Strait Islander workers and community members who report to their regions. The Gathering Committee has identified the need for improved support services to Aboriginal people through increased autonomy and development of service organisations, as well as transport, respite and general access to HACC and disability services.

The need to increase the number of Aboriginal HACC Development Officers to facilitate and promote HACC access to Aboriginal people is a top priority. Ideally these positions should be targeted to western NSW where currently there are limited resources available for local transport development, and a strong case to better meet the needs of Aboriginal communities that are dislocated from services and employment. A renewed emphasis must also be placed on improving the responsiveness of generalist services to Aboriginal communities.

In 2008-09 the HACC program received approximately 7.2% growth in funding. Despite this very welcome enhancement, there are several critical priorities for, and pressures on, the NSW HACC system and providers including:

- Expanded funding towards equity for Aboriginal HACC clients on a population and needs basis supported by public reporting, especially in the areas of:
 - i. innovative Aboriginal transport projects to improve the delivery of transport to Aboriginal people;
 - ii. strategies supporting the development of Aboriginal non-government organisations to improve the provision of community care (and disability) services by and for Aboriginal people; and
 - iii. an Aboriginal workforce plan for community care (and disability) services
- The extension of non-government HACC Development Officers (HDO):
 - i. an additional three Aboriginal HACC Development Officers across NSW; and
 - ii. extra HDOs to areas not presently covered e.g. Orana Far West, Illawarra and parts of Southern region.
- Escalating infrastructure costs, including indexation, due to the impact of rising petrol prices, climate change for organisations and clients.
- Capacity building in rural and remote services.

NSW reported one of the lowest numbers of HACC services received per thousand people in the HACC population and remains significantly lower than the national average...

- Transport: Recognising that most HACC services require a transport component and that transport is an essential enabling service to access other necessary services and supports.
- Attracting and maintaining qualified workforce.
- Providing advocacy to assist in navigating the complex community care system, particularly for Aboriginal clients and families and those from culturally and linguistically diverse backgrounds.
- Real progress towards the implementation of a wellness or restorative approach.
- Promoting HACC services throughout the general community.

The Australian Government Community Care Reform process, *The Way Forward*, continues to impact on the provision of HACC in NSW. Currently the NSW Hunter HACC Access Demonstration Project will be evaluated along with other access and assessment trials across Australia, expecting to report in 2008. Any reform that delivers better client outcomes and systemic improvements will be welcome but there are serious concerns that, in light of escalating demand and increased populations, more emphasis will be placed on rationalising services and collection of fees. In NSW, 91.7% of HACC users are reliant on a Government pension or benefit.¹²

NCOSS is concerned that in NSW the anticipated three year planning process under the new HACC Agreement will begin with a one year process followed by a two year plan in the first triennium. The expected outcome of a more streamlined government planning and approvals process could have delivered the needed funding in a more strategic and timely manner.

The Productivity Commission Report on Government Services 2008 indicates that NSW receives the lowest Australian Government expenditure per person aged 70+ years and Aboriginal people aged 50+ years in the HACC program, as well as in the National Respite for Carers Program and the Day Therapy Centres Program.

Action

The NSW Government increases its financial contribution to the HACC Program by 20% regardless of the Australian Government contribution.

Cost: **\$44.7m recurrent**

■ Recommendation 2: Seniors Card

State Plan Priorities: R4, F1

Results

- Seniors Card available to Aboriginal and Torres Strait Islander people from 45 years of age.
- Removal of current inequity in Seniors Card concession program.
- Reduction in social disadvantage by improving transport affordability for older Aboriginal and Torres Strait Islander people.

Evidence/Rationale

The NSW Government currently provides a Seniors Card to people aged over 60 years who work less than 20 hours a week. This entitles cardholders to a range of discounts for government and private business services. Significantly, the Seniors Card enables beneficiaries to take advantage of concession fares and Pensioner Excursion Tickets on some transport services.

Due to the reduced life expectancy of Aboriginal people, more than 17 years lower than the rest of the population; many Aboriginal people will never have access to Seniors Card benefits. Lowering the eligibility age for Aboriginal people to 45 years would improve access to affordable services that are currently available to other older people in NSW.

Expanding the eligibility for the Seniors Card would prove useful given reforms in the bus services area. The NSW Government has expanded bus concessions and the Pensioner Excursion Ticket to all parts of metropolitan Sydney and some country areas. Lowering the eligible age for Aboriginal and Torres Strait Islander people would allow them to take advantage of these concessions and help address some of the transport disadvantage faced by Aboriginal people.

Action

Expand eligibility for the Seniors Card to Aboriginal and Torres Strait Islander people aged 45 years and older.

Cost

NCOSS is unable to adequately determine the costs for this proposal. Approximate impacts for the

NSW Government can be determined by reference to forward estimates allocations for concession and Pensioner Excursion Ticket (PET) expansion in the bus services area.

■ Recommendation 3: Accommodation options for people with disability

State Plan Priorities: R4, F2

Results

- Renewed commitment to devolution of all people with disability out of large disability institutions into supported community living situations which conform to the NSW Disability Services Act by 2012.
- Rapid acceleration of provision of supported living situations for people with disability, comprising access to housing and support opportunities which conform to current state legislation and reflect that of other adults.

Evidence/Rationale

In 2006, the NSW *Stronger Together Disability Plan* heralded a significant new investment in disability services over five years, including a planned increase of \$50.6m in 2009-10. *Stronger Together* provides a range of supports to people with disability, but NCOSS argues that the provision of supported accommodation must be immediately accelerated. By mid-2011, *Stronger Together* will have provided 990 new supported accommodation places in NSW, comprising 650 places for people connected with Departments of Community Services and Corrective Services and 340 places for people now living in the community (i.e. unmet need). Between 2006 and mid-2011, the number of Attendant Care places will increase by 320.

In 2007, the Commonwealth Government committed to a range of spending initiatives primarily to families with children with disability under 16 years and ageing parent carers aged 65 years supporting people with disability aged 40 or more. This includes 1,750 new supported accommodation places across Australia by 2012. Using population proportions, NSW could receive one third or 583 of these places.

In its June 2007 *Report on Current and Future Demand for Specialist Disability Services*, the Australian Institute of Health and Welfare (AIHW) provided estimates of unmet need in the year 2005 for a range of disability supports including accommodation and respite services. Using these estimates, in the year 2005 NSW had an unmet need for accommodation and respite services of just under 8,000 places.

This NSW unmet need for 8,000 new places in the year 2005 is alarming given that planned spending on supported accommodation by the NSW and Commonwealth Governments could provide up to only 1,933 new places by the year 2012.

The AIHW acknowledges that these estimates are likely to be conservative and affected by other pressures that will compound unmet need, such as projected increases in the size of the population of people with severe or profound disability, increased levels of need for assistance due to the ageing of the person with disability and their carer, reduced access to housing options, ongoing choice by people with disability towards community living and the falling ratio of carers to people with disability.

At current and planned spending levels, if there is no immediate acceleration in the provision of supported accommodation, NSW in the provision of these supports to people with disability will remain in crisis in 2012.

At present, around 2,000 people with disability are living in large residential institutions in NSW. The NSW Government has shelved its 1998 commitment to close all disability institutions or large residential centres by 2010. Several of these institutions will be redeveloped to include residential aged care but NCOSS is not aware of any current plans for the closure of any disability institutions. There is no obvious funding allocation under the *Stronger Together Disability Plan* for the continuing transfer of people with disability out of congregate care. In order to facilitate this, NCOSS supports and encourages the development of a devolution plan that complies with the NSW Disability Services Act to enable improved living conditions and opportunities for some of the most vulnerable people in NSW.

There is ample available and current evidence that more individualised and community based living delivers significantly better outcomes for very vulnerable people in our community.

There have been no new recurrent budget allocations to progress devolution in recent years and NCOSS looks forward to a renewed commitment with firm schedules towards closure of large institutions as an urgent priority.

Actions

- That the NSW Government trebles its planned 2009-10 growth *Stronger Together* allocations to supported living to begin to address escalating unmet need of people and families with disability. This comprises an increase of an additional 120 Attendant Care Places (costing \$9.4m) plus an additional 120 supported accommodation unmet

...more individualised and community based living delivers significantly better outcomes for very vulnerable people in our community.

need places (costing \$15m) at a total cost of \$24.4m recurrent.

- That NSW Government provides an immediate additional allocation to accelerate the devolution of people with disability from institutions using a fully funded and timetabled implementation plan. This year's increased investment will be \$24.4m.

Cost: \$28.8m recurrent

■ Recommendation 4: Individualised Packages to support people with disability

State Plan Priorities: R4, F2, F4

Results

- People with disability and families have control in addressing their particular individual needs.
- The disability service system and providers can create long-demanded flexibility necessary to meet individual needs through specific planning.
- An end to perceived over-servicing in disability services.

Evidence/Rationale

The NSW *Stronger Together Disability Plan* certainly includes an intention to explore individualised funding to people and families with disability. NCOSS is concerned that other spending priorities will defeat this important support initiative in the first five years of the Plan. Individualised Packages provide a new approach in NSW to supporting people with disability, which can engage with but does not rely on established service models or systems.

Individualised Packages of support have been successfully implemented in several other Australian states and overseas for a number of years. This new approach to supporting people with disability does not revolve around service providers but is tailored to the needs of the individual person with disability. Disability service providers, however, can be integral to support the needs of the individual.

Individualised Packages provide an amount of funding customised to the specific needs of the person. It means that gathering an appropriate mix of supports no longer depends on the existing capacity of a number of local service providers. The person with disability and their family can purchase necessary supports when required and, according to the needs, interests and aspirations of the person, from any appropriate source.

From a client's viewpoint, this gives the person with disability the power to engage the type and level of support they need rather than trying to fit into a service system that may not be appropriate, could only band-aid their needs and could be unnecessarily expensive. An Individualised Package will provide the flexibility to address different needs at different life stages as well as cultural issues, especially useful to Aboriginal people with disability and those from culturally and linguistically diverse backgrounds. It can also better engage the individual's personal resources, supports and strengths. NCOSS believes this to be a more effective and efficient way of providing support, instead of fitting often square pegs into round holes in a service system experiencing overwhelming demand.

The effective implementation of Individualised Packages involves three important components:

1. **Funding package:** adequate to the level of support needed by the person.
2. **Technical expertise:** a qualified disability advisor, a technical expert responsible to the person with disability, is available if needed to assist in developing the tailored package of supports and designing staff activities etc.
3. **Financial intermediary:** this is a person or organisation that, if required, manages the mandatory infrastructure requirements i.e. finances, legal obligations, contracting etc.

There is extensive experience and learning available on successful implementation from other Australian states and internationally. The Department of Ageing, Disability and Home Care would only need to apply this knowledge in a NSW context.

Action

That the NSW Government provides 300 Individualised Packages, on a sliding scale according to needs, to people with disability and their families.

Cost: **\$19.5m recurrent**

■ Recommendation 5: Parity for the Post School Options Program

State Plan Priority: F2

Results

- Equitable quality and adequacy of service for adults with disability in the Post School Options Program.
- Appropriate and adequate supports for adults with disability and families for skills development, ongoing learning and community involvement.

Evidence/Rationale

The NSW Government is working towards improved participation of people with disability in employment and in the local community. Students with disability who left school after 1999 and who have not directly entered employment or a Commonwealth employment program, have been channeled into either the Transition to Work or the Community Participation (CP) programs. The provision of accessible and affordable transport would improve the independence of people attending these programs.

There are, however, 1,400 people with disability in the Post School Options (PSO) Program who remain overlooked in the reforms of skill development and participation opportunities for adults with disability. The PSO Program operated for young people who left school in the years 1992 to 1998. PSO participants are comparable in levels of disability and support needs to people on the newer CP program but receive significantly less per capita funding, despite similar expectations and required outcomes. Many PSO programs are operated by organisations also running CP programs. The PSO users receive significantly lower per capita funding and less flexible programming sometimes involving higher costs.

DADHC is planning to review this Post School Options program along with day programs. Unlike day programs and despite assurances, NCOSS notes that no accompanying funding allocation is evident in either the *Stronger Together* plan or state budget forward estimates.

NCOSS also notes the plan under *Stronger Together* for a review of day programs for older adults with disability accompanied by forward funding commitments for 780 new places by 2010-11. NCOSS welcomes this review, and urges that the review report be made public.

Action

That the NSW Government:

- Re-align funding levels of the Post-School Options Program to match those of the Community Participation program

Cost: **\$7.3m recurrent**

■ Recommendation 6: Towards 2030 Priorities for Older People

State Plan Priorities: R4, F4, F5, P4

Results

- Older people experience healthier lifestyles, increased participation and better health care and opportunities in NSW.
- Older people can share their experience and expertise within the community and among generations.
- People and families experiencing dementia have improved access to Dementia Advisory Services in their local and regional areas, as an important early intervention initiative.

Evidence/Rationale

NCOSS and the NSW Aged Care Alliance welcomed the whole of NSW government strategy *Towards 2030: planning for our changing population* launched by Premier Lemma earlier this year. *Towards 2030* sets out the NSW strategies to manage the rapid ageing of our population. Accordingly, NCOSS has used the strategic outcomes identified in *Towards 2030* to present the evidence.

- 1 *Getting in early: planning for change.*
NCOSS notes that, despite proportional population increases of older people, funding has remained effectively static to the Ageing Program administered by DADHC, over several years. The Ageing Program funds leadership within non-government state-wide organisations to promote the needs, rights and interests of older people through systemic advocacy, information provision and some project initiatives.
- 2 *Improving prevention and early intervention.*
Alzheimer’s Australia reports that the number of people with dementia in Australia is expected to increase by 327% between the years 2000 and 2050, while the total population increases by less than 40% during that time. In NSW this year, more than 82,000 people already live with dementia and there will be 19,000 new dementia diagnoses. A small proportion of these will be people younger than 65 years old with early onset dementia.

NCOSS and the NSW Aged Care Alliance welcomed the whole of NSW government strategy ‘Towards 2030: planning for our changing population’ launched earlier this year.

Dementia Advisory Services (DAS) are a valuable early intervention resource to people and families living with dementia. The first two NSW Action Plans on Dementia provided 29 DAS positions across NSW, nine on a part-time basis. DAS positions promote dementia awareness and training; provide information and referrals; link people to assessment and support services; and assist carers with home management strategies. DAS, however, does not have comprehensive coverage in NSW. An increase in funding to upgrade existing part-time positions to full-time is urgently required to meet existing demand and in light of a projected upsurge in the incidence of dementia.

- 3 *Facilitating participation in all areas of society.*
A rapid growth in the proportion of older people in NSW is projected to result in increased state and federal expenditure. But there must be due recognition that this population can also create positive opportunities for NSW. The increasing support from grandparents, the enhanced financial resources of many older people, the increasing availability of a new group of willing and experienced hands are but a few of the opportunities that a healthier and longer lived retirement can present.
- 4 *A productive, skilled and adaptable workforce.*
NCOSS notes that many of the 12 month strategies in *Towards 2030* are designated “within existing resources” and fears that without seed funding for innovative projects, many of these strategies will fail to deliver an actual benefit to older people now and in the immediate future.

The provision of seed funding for a range of initiatives under *Towards 2030* will ensure the energetic involvement of government agencies such as Transport, Health, Housing, Fair Trading and Police in deliberately responding to the needs of older people. It could also ensure specific reporting as part of the recommendation priorities and open opportunities for people to become involved in a quality workforce, particularly responsive to older people.

5 *Providing quality care and support.*

While the primary responsibility for aged care rests with the Federal Government, older people's access to service supports and general community infrastructure clearly depends on a commitment from the NSW Government. This NSW commitment must be two-fold involving short term improvements for the older people of today as well as longer term planning for a general ageing of the population.

Actions

The NSW Government supports positive ageing in NSW, lead by DADHC, through the provision of:

- \$540,000 to upgrade the nine existing part-time positions to full time in order to extend and build the capacity of Dementia Advisory Services across NSW.
- An additional \$2m funding for the *NSW Plan Towards 2030* for at least three cross-portfolio initiatives per year which engender collaboration between government agencies on critical issues for older people.
- \$1m for inter-generational projects which share the experience and expertise of older people within the community.
- \$1m funding for education and activity programs which foster positive ageing in older people in NSW.

Cost: **\$4.54m recurrent**

■ Department of Community Services

■ Recommendation 1: Children's Services Regulation: Staff to child ratios

State Plan Priorities: F4, F6, F7

Results

- Improved quality of centre based early education and care.
- Children in centre based care receive a high quality education and care experience in a nurturing environment.

Evidence/Rationale

NCOSS understands that the NSW Children's Services Regulation is due to be reviewed in 2008. A key reform of the regulations should be to change the staff to child ratio from the current regulated 1:5 to 1:4 for children under two years in NSW children's

services. In May 2004, at the recommendation of the then Minister for Community Services, Ageing, Disability Services and Youth, the Department of Community Services set up a cross-sectoral Task Force to examine strategies to enable this change. The majority view of the Task Force was that 'it is possible for the 1:4 ratio to be introduced, in a staged manner, with minimal, if any, impact on the supply of places in children's services, and minor impact on the cost of places'.¹³ However a dissenting report was provided by the two representatives on the Task Force from Child Care NSW.

The research supporting an improved staff to child ratio for under 2s is well-documented throughout the 1:4 report, including responses to the review of the Children's Services Regulation 2002 by Australian academics and early childhood experts, the work of Ron Lally who has labelled a ratio of 1:5 a "ratio of neglect", and a report by the Australia Institute on Child Care Quality in Australia by Emma Rush.¹⁴

The reason given by the Minister for not implementing the majority report recommendations was concern that NSW would lose licensed places for babies, and that the parents would be faced with increased costs. However, the move to 1:4 in both Queensland and Western Australia does not appear to have had these impacts. Moreover the research undertaken by Price Waterhouse Coopers in preparation for the Review of the Children's Services Regulations in 2002 had noted that only 13% of places in centres are for under twos and that of these, around 50% (mostly in community based services) were already operating at 1:4.

Actions

- The Children's Services Regulation 2004 should be amended to regulate for a 1:4 staff: child ratio for children under two in centre based care.
- Business support should be provided to centre based children's services that have less than 40 places and need to move to a 1:4 ratio for children under two.

Cost: **\$150,000 - \$200,000 for business support, once 1:4 is implemented**

■ Recommendation 2: Community Services Grants Program

State Plan Priorities: R1, R3, R4, F1, F4, F6, F7

Result

Disadvantaged children, young people, families and disadvantaged communities are resilient and safe.

Evidence/Rationale

The Community Services Grants Program (CSGP) offers a diverse range of programs and services. It has at its core the provision of support and early intervention services to children, young people, families and communities aimed at reducing risk, preventing crisis, and supporting clients and communities to overcome disadvantage. A key aspect of the CSGP is that it builds capacity allowing local responses to community needs.

There is a need for additional resources to expand both universal and targeted services to continue to reduce child protection reports, address the numbers of children and young people who enter OOHHC and reduce poverty and disadvantage generally. Such preventative and early intervention services should form the greatest proportion of the child and family welfare service system in NSW.

CSGP is the only program in the Department of Community Services with a strong capacity to work across family and community needs, and across the silos of government service systems, to ensure an integrated approach to service delivery. It also has a proven track record in harnessing funding, services, volunteers and community to deliver real results at a local level.

Some key strengths of the Community Services Grants Program:

- Involving community members in identifying local issues and problems;
- providing information and education to community members;
- training workers to work sensitively in disadvantaged communities;
- involving the community in program design, planning and implementation;
- involving community members in community research and evaluation;
- tailoring the program to the unique needs and strengths of the community; and
- sensitivity to the ethnic and cultural diversity of the community.

Funding of \$80.1m per annum in 2008-2009 is inadequate. This program has received no increase in funding since a small amount (\$2.5m) in 1995, other than indexation, despite figures that indicate that poverty and disadvantage are increasing in NSW.

Funding has not kept up with the cost of service delivery and services have seen a radical reduction in capacity over the past fifteen years despite increasing demand for assistance and services. Services report waiting lists, increased referrals, inability to provide much needed services, and the need for additional staffing to provide the services. Service capacity has decreased by at least 30% (based on relative cost of

CSGP... has a proven track record in harnessing funding, services, volunteers and community to deliver real results at a local level.

staff and the failure of indexation to keep up with real costs to services).

Over the past few years, the Department of Community Services, in consultation with the sector, has reviewed the CSGP. The new 'headline result' of "disadvantaged children, young people, families and disadvantaged communities are resilient and safe" has been developed. A 'maintenance of effort' bid was submitted to Treasury by the Department of Community Services that sought an increase in funding just to maintain the current level of service provision. A business case for enhancing program funding to allow services to realign with the new headline result was developed and submitted to Treasury prior to the 2008-2009 budget. However, neither the maintenance of effort nor the funding to realign services was announced in the 2008-2009 budget. Unfortunately, the reform process has been caught up in the Special Commission of Inquiry into Child Protection Services by Justice Wood.

There are around 950 CSGP funded services across the state. Many of these have cut back on services and some are now at risk of closure because funding has not kept pace with costs. Most of these services will also require additional funds to meet the target group demand and to be able to provide the amount and quality of service that is required to address serious levels of disadvantage in our community. Additional funding is also needed to facilitate the realignment of services to the new program result.

The CSGP is fundamental to building the platform on which other services and programs, including early intervention and prevention programs, rests. Increased funding of the program is now a matter of the utmost urgency.

Actions

- Provide program maintenance funding to CSGP to enable services to meet current levels of demand.
- Provide increased funding to the program to assist services to realign with the new program vision and results.

Cost: **\$50m per annum**

**■ Recommendation 3: Children’s Services:
Early Childhood Teachers**

State Plan Priorities: F4, F6

Result

Children start school ready to learn.

Evidence/Rationale

The presence of university trained, early childhood qualified teachers is one of the key indicators of quality in child care.

Currently only centres with over 29 children are required to employ qualified teachers, and increasing numbers of services, especially preschools, are finding it difficult to afford qualified staff.

It is inequitable that some children – those in centres with less than 30 places – should miss out on the programming and educational benefits provided by qualified early childhood teachers in children’s services. It is equally important that the cost of employing qualified teachers, ranging from \$6,000 to \$20 000 more than diploma qualified staff - should not push the cost of early childhood education and care beyond the reach of low to middle income families.

Funding for improved quality would assist the goal of universal access to high quality early childhood education programs delivered by degree-qualified early childhood teachers, for at least 15 hours per week, 40 weeks of the year.

Action

The Department of Community Services should fund the differential between the cost of diploma qualified staff and early childhood teachers for the number of teachers required by the Children’s Services Regulation 2004, and for one teacher position for all centres where the number of places is less than 30. For the first position, the differential should be paid at the maximum rate, and for subsequent positions at a rate based on teachers on Step 5 of the State based Award.

Cost: **\$33.3m**

**■ Recommendation 4: Early Intervention –
9-17 year olds**

State Plan Priorities: R1, R3, R4, S3, S4, S5, F3, F4

Results

- Reduced reporting of abuse and neglect of older children and young people.

- Reduced entry of older children and young people into out of home care, SAAP and the juvenile justice system.

Evidence/Rationale

As at March 2007, 65.5% of all reports to the Department of Community Services relate to children over the age of five.¹⁵ The number for older children and young people aged ten to seventeen entering care is approximately 4,200.¹⁶ There is evidence that, while younger children aged under five enter out-of-home care most frequently, there is also a sharp intake of those between eleven and fourteen years of age, an entry more likely to be associated with significant family breakdown.

The Brighter Futures program is currently targeted to children 0-8 with a heavy emphasis on children 0-3 and 0-5. However in its original conception, the early intervention funding was meant to cover children up to the age of 14 with a partial focus on providing support to the large numbers of older children and young people who are reported but end up as unallocated cases.

With the early intervention money now allocated and out of home care funding in the process of allocation, it is time to reconsider the role of the Department of Community Services in supporting the older age group of children and young people at risk of being reported for abuse and neglect.

Much of the early years’ intervention and prevention work has been based on the key belief, reiterated in the recent prevention and early intervention literature review by the Department of Community Services (DOCS) that ‘regulatory control of the brain and its pathways are shaped by events during the prenatal period and in the early years of life.’¹⁷ That belief drove the expansion in public policy and funding for younger children and their families.

However, new research, aided by progress in technology, clearly shows that brain development continues throughout adolescence and is not completed until the early twenties.¹⁸ These findings mean that there is another window of opportunity for the acquisition of skills and abilities necessary to make good transitions along the life course. It follows therefore that there needs to be a reorientation of prevention and early intervention to include older children and young people and to increase their in the current and emerging policies and programs. This does not mean that attention should be taken away from those early years and early childhood intervention.

Contrary to popular myth, relationships and particularly family relationships are what young

people value most in their lives, even where they had to leave their home because of high levels of conflict and abuse. In a recent survey, 73.6% of respondents in New South Wales, across all age groups from eleven years to twenty four years, put family relationships at the top of the list. This is consistent with the previous years' findings and the national response rate.¹⁹ Family relationships is also an issue of most concern to young people and the Kids Help Line has recorded concern about family relationships as top of the ten most frequent concerns about which young people in New South Wales have contacted the service in 2006.²⁰

To work effectively with young people requires a multilevel service model which has a mix of 'soft entry' and formal programs. This means adequate resourcing to meet the demands of both universal and targeted provisions.

Action

Develop and fund new models of early intervention and prevention for older children and young people, building on existing service provision. It is recognised that the range of models for this older and more diverse age group will need to be broader and more flexible than the early years intervention programs.

Cost: \$48m, to be phased in over three years, for programs to be delivered by non-government organisations

■ **Department of Corrective Services**

■ **Recommendation 1: Bail Hostels**

State Plan Priorities: R1, R2, R4, F4

Results

- Reduction in the number of adults who are refused bail and remanded in custody because they do not have access to suitable housing to qualify for release.
- Reduction in inappropriate prison stays on remand by those awaiting trial, including Aboriginal and Torres Strait Islander people, who do not otherwise have access to stable and secure accommodation.
- Increased opportunity for those awaiting trial to maintain connections to their community, including maintaining employment and studies, compared to being on remand.

...the biggest contributing factor to the increasing size of the prison population is the growth of the number of people on remand...

- Better links with other services to facilitate the provision of treatment, counselling and other remedial programs.

Evidence/Rationale

A report released by the Select Committee on the Increase in Prisoner Population (2001) noted that the biggest contributing factor to the increasing size of the prison population is the growth of the number of people on remand, and the reality that most of these people are ultimately not given custodial sentences.²¹ Between 2005 and 2006 nearly '10,500 people spent some time on remand. Fifty-three per cent (5,062) of these inmates were remanded for less than 30 days ... a review of remand statistics undertaken by DCS in 2001 found that 56 per cent of remand inmates received into custody in 1999 were discharged without a custodial sentence'.²²

The provisions in the *Bail Amendment (Repeat Offenders) Act 2002* created a specific power to allow the court to consider the appropriateness of bailing accused persons, particularly those of an Aboriginal or Torres Strait Islander background, to supervised accommodation for persons on bail. This is in line with the State Plan recommendations made by the Royal Commission into Aboriginal deaths in custody in relation to gaol as a last resort and the over representation of Aboriginal persons in custody.²³ While a number of community based accommodation and treatment services will accept people on bail, and the concept has been recommended by a number of reviews and inquiries, there is no designated, official bail hostel in NSW. However, bail hostels should only be for those who would otherwise be held in custody, not used as an additional restriction upon those who would normally be released on bail into the community.

An amendment related to the power to impose a condition 'that the accused person enter into an agreement to reside, while at liberty on bail, in accommodation for persons on bail' states that the Minister for Corrective Services 'is to ensure that adequate and appropriate accommodation for persons on bail is available for the purposes of the placement of persons on bail'.²⁴

The Select Committee on the Increase in Prisoner Population also recommended that the Government should fund two bail hostels in NSW for women, with one specifically for Aboriginal women. They noted that the hostel should be for women and their dependent children and that this is piloted for two years, followed by an independent research evaluation.²⁵

In making this recommendation NCOSS believes that Bail Hostels must be run separately to Corrective Service facilities and must be based in homes in the general community. They need to be operated by NGOs and be linked with other ongoing community support services.

Actions

- To pilot four community based and run bail hostels, one for women, one for Aboriginal women, one for young people and one for men, as a condition of their bail and to assist them to comply with other bail conditions such as attending appropriate rehabilitation or substance abuse programs.
- These pilots should be run by community based organisations (NGOs) over two years and then be progressively and independently evaluated.

Cost: **\$5.6m in 2009-10 and 2010-11**

■ Recommendation 2: Post-Release Programs

State Plan Priorities: R1, R2, R4, S5, F4, P4

Results

- A reduction in the high recidivism rate amongst NSW offenders by assisting prisoners leaving prison to successfully adapt to life in the community and avoid re-offending.
- Increased supported accommodation places for recently released prisoners.
- Other post-release services to increase in line with inmate numbers.
- Service provision to be expanded in priority geographical areas experiencing a rise in ex-prisoner numbers.

Evidence/Rationale

NSW has the highest recidivism rate of all Australian states and territories. In 2004-05, 43.5% of all inmates who were discharged from full-time custody returned to a NSW prison within two years.²⁶ However recidivism cannot be looked at only in terms of a person's criminal activities. An important factor in the risk of ex-prisoners reoffending is the extent to which they are able to resettle in the community once released from prison. This includes access to support services, including social and legal, housing and participation in activities. Meeting the welfare needs

of prisoners at the time of their release has also shown to help reduce recidivism rates. This includes money for clothes, food, household items, medication, phone calls and transport home.²⁷

Parole has also been found to result in lower recidivism rates than for those released without supervision at the end of their custodial sentence. For the parolees who did reoffend, it took much longer for them to do so than those who were simply released straight into the community. It should also be noted that post-release support is only provided to those released on parole and not to those released at the conclusion of a fixed sentence.²⁸

Evidence from other jurisdictions is that intensive support upon release including appropriate housing reduces return to prison. The NSW Department of Corrective Services does fund non-government organisations, through the Community Funding Program, to provide a range of support services to offenders and their families; however the funding to these services has not matched the increase in the number of people requiring these programs. As well, given the severe shortage of public and affordable housing, an additional \$1m annually should be earmarked for the provision of supported accommodation services to assist recently released prisoners to re-establish themselves in the community.

Action

- The NSW Government increases funding for post-release services under the Community Funding Program.
- Ensure that programs are culturally appropriate and that there are a variety of programs aimed at the different needs of men and women.
- That there are a range of programs available across regional, rural and remote NSW.

Cost: **An additional \$2.6m recurrent to increase existing programs; \$1.3m recurrent to expand services across NSW**

■ Recommendation 3: Rehabilitation Programs

State Plan Priorities: R1, R2, R4, S5, F4, P4

Results

- Increase in the number of prisoners who have access to constructive education and employment programs.
- Increased capacity for inmates to acquire skills and experience that will equip them with skills to successfully adapt to life in the community and avoid re-offending.

Evidence/Rationale

The number of people entering the prison system in NSW has been steadily rising in the last 10 years. In 2005-06 there was an average daily prisoner population of 9,101 and DCS predicts that this number will be 10,000 by 2010. Over the same time the imprisonment rate per 100,000 adult population in NSW has risen from 154 to 173.4, higher than the Australian imprisonment rate of 156.4 per 100,000.²⁹ While only 7.2% of inmates are women, this represents the highest proportion of women prisoners in the country.³⁰

Opportunities for inmates to participate in suitable rehabilitation programs have not kept up with this growth in prisoner numbers. Access to programs is also reduced by a decrease in 'out of cell hours'. In NSW the average time out of cells is 11.9 hours for minimum security and 9.2 hours for medium to maximum security. It should be noted however that NSW inmates in 'secure and open custody average fewer out of cell hours than inmates in all other jurisdictions'.³¹ Participation rates in programs are also decreasing with employment, work release and education participation rates all trending downwards since 2001-02 (though there was a slight increase in participation rates for work release and education in 2004-05).³² However, it should be noted that the total number of education modules that prisoners completed increased over 2004-05 and 2005-06.

Improved rehabilitation programs and proper discharge from prison can help to reduce recidivism. There needs to be culturally suitable programs in prison which are pitched at a level which is appropriate to the cognitive ability of the participant. If there have been any programs which have proved useful in prison, then these need to be reinforced in a supportive manner, post release if they are to have any prolonged impact.

Actions

- Increase funding for inmate rehabilitation programs to reverse recent falling participation rates.
- Ensure that programs are culturally appropriate and that there are a variety of programs aimed at different cognitive levels within the prison population.
- Conduct regular evaluations of programs to ensure that they are meeting prisoner needs and are assisting prisoners with integration and participation back into the general community.

Cost: **\$2.6m recurrent**

Improved rehabilitation programs and proper discharge from prison can help to reduce recidivism.

■ Department of Premier and Cabinet

■ Recommendation 1: Domestic Violence Homicide Review Team

State Plan Priorities: R1, F4

Results

- Reduction in the number of deaths caused by domestic violence.
- An early, more integrated and consistent response to domestic violence.

Evidence/Rationale

In NSW domestic assaults consistently account for 35 – 40% of all reported assaults.³³ In 2006 there were 26,429 domestic related assaults (around 35% of all assaults), with many suffering serious injuries.³⁴ Aboriginal women reported experiencing domestic violence at six times the NSW average and in 2003-04 Aboriginal women were 31 times more likely to be hospitalised as a result of assault than non-Aboriginal women.³⁵ The estimated total annual cost of domestic violence to the NSW economy is \$2.8 billion.³⁶

While it is not known precisely how many domestic violence related deaths occur in NSW there are on average 77 domestic homicides in Australia a year and domestic homicides make up around 20% of all homicides in NSW. It is estimated that around 20 – 30 domestic violence related deaths occur in NSW every year.

There is clearly a strong case for the introduction in NSW of a Domestic Violence Homicide Review Team similar to the ones that have been operating in the United States since the 1990s. The key to prevention of domestic homicide is to gain a better understanding of patterns, prior indicators and gaps in responses. Conducting reviews of domestic violence related deaths is one way of getting a better understanding of the nature and pattern of lethal domestic violence and abuse. A fatality review brings together representatives from various agencies:

police, courts, coroner's office, community (NGO), corrections, health, domestic violence services, shelters, perpetrator programs and child protection agencies and other professionals with relevant expertise.³⁷

Overseas, domestic violence-related homicide review teams share the position that domestic homicides are preventable, given that risk factors are usually present prior to the ultimate response of homicide. The purpose of these review teams is to understand whether there were gaps or shortfalls in service delivery in response to any problems that had been presented to agencies prior to the homicidal event and thereby to learn from the experiences. Domestic homicide review teams focus attention on victims' contact with, and access to, intervention strategies and their effectiveness. Above all, these domestic homicide review teams are not about blaming service providers but are about understanding agencies' roles and constraints in order to move forward, for the improvement of service delivery and for effective risk assessment and management to prevent such killings in the future.³⁸

In 2006 the NSW Ombudsman stated in his report to the NSW parliament that the NSW Ombudsman supports the establishment of a domestic violence homicide review process:

because we believe it has the potential to improve the collective understanding and knowledge of agencies, including NSW Police, about how domestic homicides come to occur and what strategies and practices may reduce the risk of their occurrence. A domestic homicide review process would in this way support the efforts of NSW Police to continually improve its overall response to domestic violence.³⁹

Action

- Establish a Domestic Violence Homicide Review Team within the Office of the NSW Ombudsman.

Cost: \$500,000 - \$800,000 recurrent commencing in 2009-10 based on three positions to lead the process

■ Recommendation 2: NSW Violence Against Women Strategic Framework

State Plan Priorities: R1, R3, S1, F1, F4, F5

Results

- A Whole of Government response, coordinated by the Department of Premier and Cabinet, Office for Women's Policy to address violence against women.
- Reduction in deaths, injuries and the emotional impact of family violence.
- More effective response to women and children experiencing violence.
- Strengthen the response of police, courts, health, housing, education and community services to violence against women.
- Raise the profile of the issue of violence against women and encourage people to speak out.
- Improve services and service provision to women and make services more accessible.

Evidence/Rationale

It is difficult to get information about the extent of violence that women experience. This is due to a range of factors including the acceptance by some people and cultures that violence should not be discussed outside the family, fear of reporting or shame associated with reporting, belief that there is nothing that can be done, fear of the person that committed the violence or belief that the violence was not 'serious' enough to report. Therefore information about the levels of violence experienced can only be based on those instances that are reported.

The number and rate per population of all types of assault reported in NSW increased steadily from 1997 to 2001, but have been stable over the period 2002 to 2004. The trend for domestic assaults has closely followed that of all assaults, with domestic assaults consistently accounting for 35 to 40% of all assault incidents each year. For example, in 2004, the NSW Police recorded 68,984 incidents of assault. Of these, 25,761 (37.3%) were domestic assaults.⁴⁰ The majority of domestic violence victims were women (71.1%) and the majority of offenders were male (80%).

A Bureau of Crime Statistics and Research facts page shows that in the 12 months to December 2003, NSW Police recorded 2,707 adult female victims of sexual or indecent assault.⁴¹ However in the 12 months to April 2004 10,100 adult women were sexually or indecently assaulted in NSW.⁴² In 2006 NSW court statistics show an increase in the proportion of people

convicted of sexual offences, from 48% in 2004 to 59% of persons charged in 2006 in the Higher Courts and 41% (2004) to 49% (2006) in Local Courts.⁴³

Research also shows that adult survivors of child sexual assault suffer chronic and complex sexual assault trauma. Sector estimates indicate that 90% of adults represented in mental health, drug and alcohol services, corrective services and psychiatric units have a history of childhood sexual assault. Research identifies that a best practice approach to service delivery for this client group is to offer services which are holistic and that recognise recovery time may be considerable.

The NSW Strategy to Reduce Violence Against Women was established to:

- develop prevention programs to reduce violence against women;
- conduct community education and training;
- enhance linkages within and between Government and non-government agencies;
- develop strategic policy responses; and
- support strategies and programs with partnership agencies aimed at preventing violence against women.

The Strategy is a state-wide, whole of government approach to reducing violence against women. The Strategy aims to prevent and respond to violence against women through:

- raising awareness of, and understanding about, violence against women;
- developing and promoting effective prevention strategies;
- improving women's access to services;
- improving interagency co-ordination; and
- improving the criminal justice response to violence.

Currently the Violence Prevention Coordination Unit within the Office for Women's Policy is developing a Violence Against Women Strategic Framework. However, in order to ensure the effectiveness of this framework the NSW Government needs to commit to appropriately funding services under this program.

The Victorian Government Women's Safety Strategy is often held up as a good example of what can be achieved with appropriate funding, commitment and support across Government, the public service and with the non-government sectors. The Victorian Government's commitment to the reforms is clearly visible through an ongoing process of community consultation, injection of large amounts of additional funding and a high level leadership of the system by government ministers and public service officials.⁴⁴

Sector estimates indicate that 90% of adults represented in mental health, drug and alcohol services, corrective services and psychiatric units have a history of childhood sexual assault.

The Strategy includes programs aimed specifically at Aboriginal family violence, violence experienced by children and young people.

Funding is also available, under the Victorian strategy, for a five year study to evaluate the family violence reform strategy, focusing on the integration of intervention responses.

The project will document the development of inter-agency governance of family violence services, including by police, government and non-government organisations. It will examine women's, children's, men's and practitioners' experiences and decisions, and how practitioners work individually and in cooperation with others to deliver services to the victims of family violence, and intervene with offenders. The research will be conducted by two universities.⁴⁵

Actions and Costs

► Department of Premier and Cabinet

- \$40m over 4 years to reform and integrate the family violence system (based on the 2005 amount of \$35.1m/4yrs in Victoria plus CPI to 2009).

► Attorney General's Department

- \$6.5m over four years to create Family Violence Divisions within Local Courts to provide additional expert legal and non-legal services, including family violence applicant workers, outreach workers, defendant workers and police prosecutors.

► NSW Health

- NSW Health to fund three co-ordination positions, based in state-wide NGO sexual assault services, to provide supervision, direction, professional development and support to adult survivors sexual assault counsellors - \$390,000 recurrent.
- Provide additional recurrent funding to NGO Women's Health centres in NSW, and in localities where there is no women's health centre an alternate NGO service, to employ one full time specialist sexual assault counsellor - \$2.2m recurrent.

- An additional \$3.7m provided to community managed women's health programs to enable them to continue to provide holistic health services to women across NSW (\$1.85m in funding for each existing Women's Health Centre so that there is a core recurrent funding minimum of \$300,000 and \$1.85m to provide women's health services in areas that do not already have one).

■ Legal Aid Commission

- An additional \$3.9m over four years to Community Legal Centres to fund a network of eight dedicated family violence community lawyer positions to support victims.

■ Department of Community Services

- \$800,000 for the Women's Refuge and Resource Centre, in conjunction with peak women's groups, to conduct a scoping and mapping exercise of services for women in NSW, including service provision and access.

■ Department of Premier and Cabinet (Human Services CEOs Cluster)

■ Recommendation 1: An Industry Development Plan for the NSW non-government human services sector

State Plan Priorities: P2, R4, S8

Results

- A state-wide coordinated approach to the sector's development based on a comprehensive workforce profile that informs better planning to meet the current and projected needs of the community services industry and its clients.
- A highly skilled workforce with the capacity to deliver quality services that meet the needs of the people of NSW.
- An actively enabling funding, policy and regulatory framework that supports the growth of the sector.
- Enhanced capacity for the NGO sector to deliver quality services to the community in partnership with government.
- Improved capacity to attract and retain a quality workforce and effectively compete with other industries in the labour market.

Evidence/ Rationale

The non-government human services sector receives over \$1.5 billion each year in funding, is

comprised of over 7,000 organisations and delivers an extraordinary range of essential services to the people of NSW. Like any other vital and growing industry, it needs a long term strategic plan to ensure its sustainability and capacity to meet the demands of the future.

A recent national survey of workers in the industry by the Australian Service Union (ASU) reveals the critical and growing retention and recruitment issues facing the sector.⁴⁶ Nationally 52% of workers are not committed to staying in the industry beyond five years, and the vast majority of the respondents were from NSW. The report demonstrates that comparatively poor wages and conditions, lack of career opportunities and the difficulties and risks associated with the work are major reasons why people leave the sector and inhibit our ability to recruit quality staff.

Within NSW the major identified barriers to securing relevant educational qualifications were lack of time and the cost of courses. A number of reports across various sub-sectors of the industry have produced similar and additional findings; for example the *Working in Community Aged Care: Growth or Crisis* report identified the sectors image, attracting younger workers, and competitive wages as some of the key issues facing the future workforce in aged care workforce.⁴⁷ While the sector is experiencing substantial growth (22.6% between 1999-2004, ABS Labour Force Survey), it is also ageing relatively more quickly than other sectors and experiencing increasing demand for its services (Australian Council of Social Service, 2007).

There is some data available for sections and sub-programs within the industry but a serious lack of information about the whole NSW sector and its current and projected workforce needs. There is a priority need for research that: 1) maps the composition and structure of the NSW NGO human services workforce; 2) identifies the current and emerging trends and needs within the workforce; and 3) assesses the position of the sector workforce within the context of the current labour market, including factors impacting on retention and recruitment. This research should be pursued in conjunction with universities, and labour market analysts.

Actions

Over a three year period, commencing 2009 provide funding to NCOSS to develop a state wide industry plan for the non-government community sector that includes:

- The development of a comprehensive workforce profile, including current demographics, trends, projected growth/gaps and recruitment capacity within the broader labour market.

- An industry-wide needs assessment and development of collaborative cross-sector strategies to address emerging industry skills gaps and projected client needs.
- A marketing/communications strategy to enhance and improve the visibility and profile of the sector with prospective employees and the general public.
- The establishment of a state-wide wide non-government community services industry Task Force comprised of key stakeholders across higher education and vocational training providers, Government human services agencies, NCOSS, unions and other industry peaks.
- The development of a standard funding agreement that minimises current high transaction costs, barriers to growth/investment and enables longer term planning.

Cost: \$500,250 in 2009-10 (\$1,500,750 over three years)

■ Recommendation 2: Regional Service ‘Hubs’

State Plan Priorities: P6, P7, S8

Results

- Affordable corporate services for regional and rural NGOs.
- Targeted infrastructure for regional economic development.
- Reduced compliance and on costs for participating services.
- Enhanced capacity for participating community services to focus on their core functions of service delivery and community development.

Evidence/Rationale

There continues to be considerable interest in the potential benefits and efficiencies of shared service arrangements within the non-government sector (*Sharing Financial Administration*, NCOSS, 2007, *Shared Services in Community Housing*, Office of Community Housing 2007). While the recent NCOSS report critiqued four potential models in relation to finances only, the findings have potential application across a range of corporate service needs.⁴⁸

Community organisations, particularly those in regional and rural NSW, often have limited access to specialist corporate services such as human resource advice, strategic planning, financial administrative support, IT support and professional development opportunities. In addition, many of these services are small NGOs with high compliance costs relative to their funding base. The PBS regional consultations undertaken by NCOSS

Within NSW the major identified barriers to securing relevant educational qualifications were lack of time and the cost of courses.

during 2008 again reinforced the high and unmet needs of non-metro NGOs; particularly in the areas of human resources management, information/communications technology and management and governance issues.

The corporate support needs of these organisations are best understood and delivered locally. This reduces the costs and increases relevance. However, community services outside of the metropolitan areas frequently struggle to access and afford corporate support services.

Regional Service Hubs (RSH) provides a model of a capacity building strategy that deliver regional corporate services, within reach and within budget. Functions would include:

- Delivering much needed corporate services to NGOs in regional and rural NSW.
- Facilitating more cost effective services (such as accounts, training) through packaging aggregated regional demand.
- Generating local employment opportunities.
- Leveraging business support (pro bono and subsidised expertise) and brokering affordable training opportunities to meet identified regional NGO needs.

The RSHs should be non-government organisations that understand the ‘business environment’ of the client groups and can provide specialised support to meet the needs of NGOs across program areas and service types.

Actions

Over a three year period, commencing 2009:

- Provide funding to establish pilot Regional Service Hubs in three rural and regional areas.
- Evaluate the impact and effectiveness of this model in years 2 and year 3.

Cost: \$931,500 in 2009-10 (\$2.8m over three years)

■ Recommendation 3: Increased Management Support and Research Capacity

State Plan Priorities: S8, F4

Results

- Enhanced access to best practice management and governance advice, support and resourcing to the non-government sector.
- Improved management and governance capacity of Boards of Management of funded services.
- Increased NGO access to new research and improved capacity to implement preventive, evidence based practice at the service level.
- Real capacity for cross-sectorial research/practitioner partnerships that improve outcomes for disadvantaged people through proven evidence-based service interventions.

Evidence/Rationale

The NCOSS Management Support Unit (MSU) has been funded (2.5 days per week) by NSW Health since 2000. This state-wide service proactively supports and resources the development of a high quality and effective community sector through a range of industry development projects. It also provides a 'clearing house' function through the provision of up to date information, advice and resources on best practice management and governance.

As a part time service with a state wide brief, the MSU seeks to maximise the services it can provide to members and the sector by contract partnerships. However the demand for this service far outstrips its capacity. The MSU continues to experience substantial and increased demand from NGOs funded by a range of human service agencies including the Departments of Community Services and Ageing, Disability and Home Care and requires additional funding to meet demand and provide a full time service.

A strong research evidence base is essential to inform more effective and preventative service delivery practice and improve outcomes for disadvantaged people and communities. The sector's ability to utilise and integrate new research is however severely limited by the lack of dedicated research capacity and formal links with relevant academics and research institutes. A specialist research position, based within the MSU, would:

- Undertake research to inform improved practice.
- Act as facilitator or 'knowledge broker' between the community sector and researchers/research institutes using partnership models.

- Translate findings and tested evidence based learning's into practical 'sector friendly' resources to enhance service delivery capacity.

Actions

Provide funding over a three year period to:

- Expand the NCOSS Management Support Unit from a part time to a full time service.
- Employ a full time researcher.

Cost: 2009-10 - \$232,358 (Over 3 years- \$697,073)

■ Recommendation 4: Implementation of an IT Strategy for the Human Services NGO Sector (HSNet)

State Plan Priorities: P2, P7, S8

Results

- A highly customised and cost effective 'shared service model' of IT systems and support for funded human service NGOs across NSW.
- A 'shared services' model of aggregated ICT services (telephonic and data) provision at the regional level that delivers competitive advantages via bulk purchasing.
- A sector workforce well trained and equipped to maximise the use of IT in all aspects of service delivery including data collection, referrals, acquittals and knowledge management.

Evidence/Rationale

This recommendation builds on the prior achievements of the NCOSS partnership with the NSW Government Better Service Delivery Program (BSDP) and Human Services Net (HSNet) in developing the IT capacity of the NGO sector. Through this partnership NCOSS has played a significant role in the development and implementation of newer IT equipment and applications for NGOs in NSW.

Between 2001 and 2006 the NCOSS BSDP/HSNet IT Project managed and delivered the following IT capacity development initiatives:

- Provision of internet connections and hardware to NGOs.
- Basic IT skill training to BSDP participating NGOs.
- A change management strategy including the co-ordination of implementation workers across NSW.
- A change management toolkit.
- A Human Services Net training strategy and programs.

- A client management subsidy and implementation system.

Following the implementation of these initiatives it was determined that the NGO sector needs its own IT strategy. Comprehensive research was undertaken in 2007⁴⁹ to identify the ongoing, emerging and unmet IT requirements of the NGO sector and to establish an agenda for meeting those requirements.

Information Technology (IT) capacity is now integral to communications, research, knowledge management, funding and promotion. In addition statutory reporting, financial acquittals and funding applications also increasingly depend on IT.

Appropriate IT applications and adaptations have the potential to bring improvements to financial and administrative processes, to reduce costs and to strengthen relationships. Strategies that build this capacity are therefore an essential part of the sustainability and vitality of the sector and a significant cross-sector issue.

The research undertaken by NCOSS during 2007 revealed the critical need for more investment in the IT capacity of the human services NGO sector in NSW.⁵⁰ Some of the key findings included:

- An entrenched digital divide between NGOs, based on size /income/location.
- A chronically under-met need for IT training.
- Lack of appropriate, accessible and affordable IT information, resourcing and support.
- Significant opportunities for more appropriate and cost effective models of ICT provision, maintenance and support based on aggregated demand.
- Substantial capacity to implement 'shared service' models to meet the IT needs of NGOs at a regional level.

Given the Government's increasing requirement for funded services to provide data, acquit funding and share information electronically, it is essential that the sector has the IT capacity to meet these needs. There are compelling reasons to ensure service delivery is not compromised by an inequitable and inefficient IT capability framework across the sector.

Actions

Over a three year period, commencing 2009, provide funding to NCOSS to implement the state-wide IT Strategy for the human services NGO sector including:

- A regionally-based 'shared service model' of IT support, maintenance and resourcing for clusters of NGOs.

There are compelling reasons to ensure service delivery is not compromised by an inequitable and inefficient IT capability framework across the sector.

- Substantially increased IT training provision across identified high need areas including Western Sydney, Central Coast and Far and Central West of NSW.
- Regional trials and development of a 'shared service' model of NGO based aggregated ICT services for application across the sector.
- A sector specific IT "How To" Guide for negotiating and contracting IT services.

Cost: \$1.7m in 2009-2010 (\$3.21m over 3 years)

■ Department of Water and Energy

■ Recommendation 1: Rebates for low income earners in NSW

State Plan Priority: E1

Result

Around 145,000 low income earners receive necessary help with essential living expenses.

Evidence / Rationale

Australia is faced with a relatively new form of social disadvantage - an increasing number of 'working poor' people whose main source of income is wages. The working poor phenomenon is the result of significant changes in the workforce including an increasing number of part-time and/or casual employees.

At June 2008 there were around 3 million people or 28.5% of all employees in Australia worked part time (i.e. less than 35 hours a week in all jobs).⁵¹ The vast majority of these workers are women (2.1 million).

Casual employees (i.e. those without paid leave entitlements) rose as a proportion of total employment, from 17% in 1992 to 20% in 2007.⁵² This included large increases in industries not

traditionally associated with casual labor including manufacturing, communications, finance and insurance.

The combination of part time and casual employment leaves many people with low, insecure and variable income which can lead to financial stress.

NCOSS believes concessions have the capacity to deliver much needed help to low wage earners to meet their day to day living expenses. For example, transport concessions provide a useful way to generate increased social participation and reduce isolation from services and employment (see Ministry of Transport section). Energy rebates ensure a higher standard of living, greater standard of health and cleanliness and a greater degree of comfort for recipients.

In this respect concessions and rebates should not be treated as merely a cost to Government. Indeed because capacity to pay leads to increased social participation, there are a range of social and economic benefits attached to the provision of concessions that may outweigh any immediate costs.

In April 2008, the Premier announced, as part of the electricity industry restructuring (privatisation), additional consumer protection measures are to be put in place including:

- \$65m over five years to increase pensioner energy rebates from \$112 to \$130 per annum, indexed to CPI; and
- \$27.5m over five years to extend energy rebates to include recipients of Carers Allowances (child under 16), Sickness Allowances and Special Benefits.

NCOSS welcomed these measures but was disappointed that these will only proceed if the electricity industry restructuring proceeds. NCOSS believes that these measures should proceed irrespective of the electricity restructuring.

Further, even with this expansion of rebates the system does not cover all allowance recipients and no working poor households. Working poor people should be entitled to rebates or concessions. This is the case in Victoria.

NCOSS calls for the extension of energy rebates to low income households in addition to pensioners. This can be achieved by extending the energy rebates (at \$130 per annum) to households with low income including all households reliant on Centrelink allowances and the 145,000 to 150,000 people entitled to low income Health Care Cards.

As there should be one rebate per household not all Health Care Card holders and Centrelink

allowance recipients will be eligible for the rebate. The additional cost to the NSW Government will be around \$50m per annum.

Action

Extend the \$130 energy rebate to all Health Care Card holder households.

Cost: \$50m per annum

Recommendation 2: No-interest loans for energy efficient products

State Plan Priorities: E1, E3

Result

Low income households across NSW become more efficient with their energy use.

Evidence/Rationale

Households in NSW are facing significant rises in energy prices and water prices. Many low income households have older, less efficient white-goods that consume more energy than newer models. Often, the newer, more efficient models are more expensive and beyond the reach of low income households.

In 2006, Sydney Water implemented a hardship policy that provides funding for no-interest loans to enable low income households to purchase water efficient appliances and white-goods. Similarly, the NSW Government should provide community organisations with funds to offer no-interest loans for energy efficient white-goods.

No Interest Loan Schemes (NILS) are a community based program to help low income people buy essential household items or pay various bills. Many low income households get by week to week, but are completely stuck when they need to buy an expensive appliance. No interest loans provide small loans of around \$500 to \$1,000 and these are usually repaid within one year. This allows the funds to be lent out again.

Action

The NSW Government provides \$1m in 2009-10 to the NSW No Interest Loans (NILS) Network to assist low income households to purchase energy efficient white-goods.

Cost: \$1m in 2009-10

■ Recommendation 3: Temperature Control Energy Rebates for People with Chronic Illness

State Plan Priorities: E1, F5

Result

Up to 15,000 low income earners with a chronic illness receive necessary help with living expenses and improved living conditions.

Evidence/Rationale

Many people with chronic illness require controlled temperatures to manage symptoms. For example, increases in the core body temperature of people living with Multiple Sclerosis (MS) slows down already problematic nerve transmission, exacerbating MS symptoms such as blurred vision, extreme fatigue, muscle weakness, pain, tremors, memory problems, loss of balance, bladder and bowel problems, numbness and tingling, decreases in cognitive function, and in severe instances partial or complete paralysis.

The rising cost of electricity, up to 8.5% per year, means temperature control for people on low and fixed incomes is becoming less affordable. This recommendation seeks to ensure people who require temperature control to function normally in high or low temperatures are not unfairly impacted by the rising cost of electricity.

Example of rebates/concession from other states:

- Victoria has the Medical Cooling Concession (previously known as the MS Summer Concession) which commenced approximately 10 years ago. This provides a discount of 17.5% on electricity bills for 6 months.
- Western Australia has a Thermoregulatory Dysfunction Subsidy Scheme that commenced in January 2007. The subsidy is \$335 per year (paid in monthly instalments).

This proposal is for a Medical Electricity Rebate to be provided to people with chronic illness who require controlled temperatures to function normally.

NSW does not have the extremes of temperature of WA and Victoria, hence a rebate of \$130 per year should be sufficient. This would be in addition to any rebate provided to the existing and proposed rebates. To be eligible a person would have to be certified by their doctor as having a clinical condition that is of such severity that without artificial control of their immediate physical environment they would suffer serious adverse consequences and further medical complications. They would also need to

Many low income households have older, less efficient white-goods that consume more energy than newer models.

be in possession of a relevant concession card (e.g. Centrelink Pensioner Concession Card or Health Care Card).

Action

Introduce a \$130 per year energy rebate to all low income households where a person with a chronic illness resides.

Cost: **\$2m per annum**

■ Housing NSW

■ Recommendation 1: Increased supply of affordable rental housing

State Plan Priority: E6

Result

In partnership with the Federal Government, develop and implement a five year plan to provide an additional 25,000 units of community, public and intermediate rental housing dwellings across NSW by June 2014.

Evidence/Rationale

There are 156,000 lower income households in NSW living in private rental who are experiencing housing stress.⁵³ 88,000 of these households are living in Sydney, and 68,000 in the remainder of the State. 60,000 of the lower income households in housing stress were families with children; 37,000 of these are living in Sydney and 23,000 in the remainder of the State.

The current five year Commonwealth State Housing Agreement (CSHA) comes to an end in December 2008. The Federal, State and Territory Governments have agreed that the CSHA will be replaced from 1 January 2009 with a more broadly based National Affordable Housing Agreement (NAHA), which is currently being negotiated under the auspices of the Council of Australian Governments (COAG).⁵⁴

During the life of the current CSHA the overall social housing system in NSW has not increased in size. Much of the available funding has been spent on the redevelopment of old dwellings that are no longer suitable or appropriate and the growth of community housing has largely occurred through the transfer of stock from public housing. As a result while total social housing dwelling numbers have varied from year to year they have remained in a narrow band between 147,500 and 148,500 since June 2003.

Our proposals are also consistent with the Premier's undertaking in 2005 to develop a comprehensive NSW Affordable Housing Strategy, which has not yet been finalised.

Actions

Develop, in partnership with the Federal Government, a five year plan to expand the provision of affordable rental housing in NSW by 25,000 dwellings by June 2014. This should involve two separate growth streams as follows.

- 5,000 'high subsidy' dwellings over 5 years targeted at low income households seeking access to traditional community and public housing.

While the new Federal Government has announced a range of welcome new housing initiatives, to date the missing piece in the jigsaw has been any plan to expand the supply of community and public housing.⁵⁵ NCOSS believes that there must be a designated target for additional community and public dwellings in NSW over the next 5 years. Given the number of low income households in housing stress, an appropriate target would be to expand the supply of social housing in NSW by 5,000 units over 5 years.

We do not yet know what will be the underlying financial arrangements for the new National Affordable Housing Agreement that is being negotiated via COAG. Pending clarification of this, NCOSS proposes that the NSW Government should agree to contribute one third of the capital cost of new community and public housing dwellings, with the Commonwealth contributing the remaining two thirds. This equates to a State contribution of around \$420 million over 5 years, or \$85 million a year.

- 20,000 'low subsidy' dwellings over 5 years drawing on a range of State contributions and partnership arrangements, targeted at a broader range of low to moderate income households seeking access to more affordable rental housing managed by non-profit housing providers.

A range of measures are available to the NSW Government to expand the supply of intermediate (or 'affordable') rental housing managed by non-profit housing providers. These include the remaining

funds in the Government's own Affordable Housing Innovations Fund,⁵⁶ State recurrent subsidies of \$2,000 per dwelling per year under the Federal Government's new National Rental Affordability Scheme (NRAS), land and/or dwellings generated via the planning system⁵⁷ or as a result of the redevelopment of government-owned sites,⁵⁸ and targeted reductions or waivers of state taxes and charges for investors in rental housing.⁵⁹

NCOSS believes that the best outcome can be reached by the judicious mixing and matching of these measures, in conjunction with the Federal Government's NRAS contribution of \$6,000 per dwelling per year and access by eligible tenants to Commonwealth Rent Assistance. A crucial factor in this process is the cost structure of the housing market in particular locations, and the availability of contributions from other partners, such as councils, landowners, developers and government development corporations.⁶⁰

What is needed from the NSW Government are three things:

- An integrated affordable housing strategy, that meshes planning initiatives with housing-based funding programs;
- A guaranteed supply of NRAS state recurrent subsidies sufficient for NSW to secure 16,650 NRAS dwellings by June 2012,⁶¹ and
- A further injection of capital funding into the Affordable Housing Innovation Fund to assist registered community housing providers develop sustainable affordable housing projects.

Cost:

- \$85m per year over five years as the State's contribution to the expansion of community and public housing dwelling numbers;
- \$7.3m in 2009-10 for up to 3,650 NRAS state subsidies, and a total of \$57.2m over 3 years; and
- \$20m capital injection for the Affordable Housing Innovations Fund in 2009-10, as part of a total injection of \$100m over 5 years.

■ Recommendation 2: Better linking housing and support services

State Plan Priorities: F2, F3, R2

Results

The development of new sustainable models of partnerships delivering housing and support services to identified client groups, building on the findings of the Shared Access Trials under the Housing and Human Services Accord.

Evidence/Rationale

Housing NSW has partnered with nine other State Government human service and justice agencies to develop the NSW Housing and Human Services Accord. The objective of the Accord is to assist social housing tenants with complex needs to receive the support services they need to live independently in the community and sustain their tenancies, and to assist clients of human service agencies to gain access to social housing.

Under the Accord target client groups include people who are homeless or at risk of homelessness; the frail elderly; people with a disability; young people under 20 years of age without family supports; families with children; and people on very low income, such as aged pensioners, the unemployed and very low paid workers.⁶²

Government agencies involved in the Accord have commissioned a series of Shared Access Trials to pilot joined up arrangements under which mutually agreed clients are provided with public or community housing while receiving a support package from a human service agency. The two most substantial trials have involved 12 young people leaving DOCS out of home care in the Hunter/Central Coast regions and 10 women leaving the Dillwynia Correctional Centre. These two trials have been evaluated but the final evaluation report is still being finalised. Further trials are underway involving people who are homeless and adults with an intellectual disability and other proposed trials are due to commence in the near future. A separate trial has been conducted in four locations of a proposed Client Information Sharing Agreement for Accord purposes.

NCOSS strongly supports the Shared Access Trials. They address longstanding holes in the safety net concerning vulnerable groups who need access to both secure affordable housing and ongoing support services. The problem is, however, that the trials are being self-funded by the agencies concerned as the NSW Government has said that Accord initiatives are to be funded within existing resources. While this might work for initial trials in defined geographical areas, once models of joined up service delivery are successfully demonstrated they need to be translated into more substantial and system-wide programs. The Government itself recognised this reality when it funded the highly successful Housing and Accommodation Support Initiative (HASI) to provide housing and support to people with a mental illness.

Action

The NSW Government should allocate an initial amount of \$30m per annum for the state-wide implementation of successful Shared Access projects under the Housing and Human Services Accord. In

...to date the missing piece in the jigsaw has been any plan to expand the supply of community and public housing.

accordance with the principle of joined up service delivery approaches, the distribution of this funding between specific support programs should be determined by the Human Services and Justice CEOs Forum, in consultation with the NGO sector, with Housing NSW as the lead agency.

Cost: **\$30m per annum**

■ Recommendation 3: Shared equity scheme for social housing tenants

State Plan Priorities: E6, R4

Results

The development of a shared equity scheme to assist social housing tenants with the financial means to sustain a modest mortgage into home purchase through the selective sale of government owned housing stock on larger housing estates, with the NSW Government retaining at least a 25% equity share of all stock offered for sale under the scheme.

Evidence/Rationale

Over the past decade moderate income households have experienced increasing difficulties in accessing home ownership, as the cost of housing has been rising much more quickly than household incomes.

At the same time large public housing estates have become the most visible symbol of increased polarisation and concentration of disadvantage within our major urban centres. This has prompted consideration of a variety of strategies to achieve a more balanced social mix in public housing estates through the redevelopment of existing stock, dispersal of disadvantaged households and encouragement of private housing investment.

While NSW has a strong record on regeneration initiatives, to date it has not implemented any government-backed schemes to assist social housing tenants into home purchase opportunities. This is in marked contrast to the situation overseas⁶³ and in other jurisdictions within Australia.⁶⁴

Shared equity schemes have frequently been identified as a key means of assisting specified households into home ownership. While there are different models available, they all involve some form of equity sharing where purchasers benefit from lower purchase and thus mortgage costs in exchange for sharing any appreciation in the value of their home with either an equity loan provider or a shared owner. By trading some future capital gains for lower upfront financing costs, home ownership can become more accessible to certain lower income households who have the means to sustain a modest mortgage.⁶⁵

Action

Develop a shared equity scheme to assist social housing tenants with the financial means to sustain a modest mortgage into home purchase through the selective sale of government owned housing stock on larger housing estates, with the NSW Government retaining at least a 25% equity share of all stock offered for sale under the scheme.

There are a number of locations where the NSW Government is actively reducing the proportion of dwellings that are owned by Housing NSW, or preparing major redevelopment plans for existing estates. These provide the most suitable locations for the initial implementation of a shared equity scheme for social housing tenants in NSW.

It is suggested that the NSW Government retain between 25% and 40% of the equity in the property, depending on the tenant's circumstances. The purchase of the tenant share would be funded solely by private resources or ordinary mortgages from private financial institutions. Potential purchasers would be offered access to independent financial and legal advice.

Cost: **unknown**

(It is impossible for NCOSS to cost the budgetary impact of such a scheme. Essentially the Government would forego some revenue from the sale of stock by retaining an equity share for a set period or until certain events occurred.)

Legal Aid Commission

Recommendation 1: Community Legal Centres

State Plan Priorities: R1, R2, R4, F4, F7

Results

- Improved access to justice services by socio-economically disadvantaged individuals and families in NSW.
- Increased capacity to provide legal advice, information and education to disadvantaged people across the state.
- Avoidance of escalating and unnecessary costs accrued due to the inability of centres being able to assist at the early stage of a legal problem.
- Increased confidence in the ability of the NSW Government to ensure that disadvantaged people have the same equity of access to legal services that the wealthy have.

Evidence/Rationale

Eighteen generalist and thirteen specialist Community Legal Centres (CLCs) receive funding under the NSW and/or Commonwealth Community Legal Services Program (CLSP). CLCs target their services to our most disadvantaged communities and those most in need, such as women facing domestic violence, ex-prisoners, people with mental illness, young people, people with disabilities, Aboriginal people, and homeless people.

In February 2007, the Final Report of a three year joint Commonwealth/State Review of the NSW Community Legal Services Funding Program was released. NCOSS was represented on the Steering Committee of the Review and supports its recommendations.

The CLC Review found that:

- Community legal centres provide an effective and efficient form of legal service delivery in response to the legal needs of disadvantaged members of the communities they serve;
- Centres should retain their flexible Strategic Service Delivery Model which allows centres to provide a range of legal services according to their research into local legal needs;
- The Community Legal Services Program is significantly underfunded; and
- Almost all centres are overwhelmed by demand for their services and cannot sustain their current level of service, let alone meet emerging service gaps.

Other research in 2006 found that CLCs work is characterised by an emphasis on early intervention – advice and information provided to people in a plain English, non-bureaucratic manner, often at early stages of a legal dispute. This intervention could make a huge difference to the lives of individual people and the NSW community.

Despite the innovative and crucial work that CLCs are engaged in, many are desperately underfunded and face increasing demand. The 2007 ACOSS survey found that a massive 33% of eligible clients were turned away during 2005-06.

NCOSS therefore supports the provision of additional funding to bring all CLCs up to a minimum funding baseline of \$500,000. NCOSS also supports new funding for employment law services, legal services for refugees and legal services for people with intellectual disabilities.

Actions

- The NSW Government to continue to provide and increase funding to \$500,000 for all Community Legal Centres.
- The NSW Government increases the existing budget for the Community Legal Services Funding Program from \$4.3m to \$5.62m recurrent.
- The NSW Government continues to provide funding of \$500,000 per year for the provision of new services relating to employment law, legal services for people with intellectual disabilities, and legal services for refugees.

Cost: **\$4.22m per annum**

■ Recommendation 2: Women’s Domestic Violence Court Assistance Program

State Plan Priorities: R1, R2, F4, F7

Results

- Sustainable services by funding services at a level that ensures their capacity to deliver high quality, sustainable, professional services.
- Improved equity of access by considering geographic access and equity of access for specific client groups.
- More equitable, cohesive and consistent response to domestic violence.

Evidence/Rationale

The Women’s Domestic Violence Court Advocacy Program (WDVCAP) provides funding for specialised legal and support services which assist women and children in obtaining legal protection from domestic violence. The Program provides funding

Despite the innovative and crucial work that CLCs are engaged in, many are desperately underfunded and face increasing demand.

for 33 WDVCA Services that assist women at 59 court locations throughout NSW. WDVCA work in partnership with Local Courts staff, the New South Wales Police Force and the legal profession in providing these services.

According to the 2006-07 Annual Report of the Legal Aid Commission the WDVCA delivered 40,066 services to women. 68% of clients in finalised matters who were assisted by the program obtained final Apprehended Domestic Violence Orders.

Legal Aid administers the NSW Government funding for the WDVCA which in 2007-08 was \$4.2m. Funds are distributed to NGO Service Providers, who establish and manage WDVCA Services in the courts. In the 2007 State Budget, the NSW Government announced that the funding for the Program would be increased by (64%) in 2009-10. That is there will be an additional \$2.7m in 2009-10, increasing to \$2.8m in 2010-11. It has been noted however that the additional funds provided in 2009-10 are to be spent on increasing the capacity of existing Schemes to deliver services to an increased number and broader range of clients in currently serviced Local Courts and establishing schemes for five new locations.

However, there is clear evidence of an immediate need for more funding for WDVCA, particularly for areas of high need that have no programs and in those areas where the schemes are stretched over a wide area and number of courts.

NCOSS therefore calls again on the Government to increase funding to the WDVCA in this funding year.

Actions

The additional funds promised in 2007 to be implemented in this funding cycle as promised.

Cost: **\$2.7m in 2009-10, with an additional \$1m in 2010-11**

■ Ministry of Transport

■ Recommendation 1: Capacity to pay transport related fines

State Plan Priorities: R2, R4, S1, F1, F2, F3, F4, P4, P7

Results

- A reduction in disproportionate hardship faced by low-income fine recipients.
- A potential reduction in State Debt Recovery Office enforcement costs.
- A potential savings in costs associated with a reduction in pursuing unpaid fines for the criminal justice system.

Evidence/Rationale

Any monetary penalty will create significant hardship for low income people. Low income households typically have little or no disposable income, and face financial barriers to accessing basic services. Households relying on an allowance or pension income are in a particularly precarious position, with limited capacity to enter into even very low level time to pay arrangements. Other factors such as health, disability and transport can further compromise the ability of low income people to meet the obligations imposed by a monetary penalty. This situation is exacerbated when individuals on low incomes accumulate unpaid fines, creating a seemingly inescapable spiral of fine related debts.

Because traffic and CityRail fines in NSW are fixed in level, they are economically regressive in practice. Fine recipients on lower incomes will suffer relatively more severe consequences than those on higher incomes.

Transport related fines impact significantly on low income households located in outer suburban and rural and regional areas that do not have ready access to public transport, and are reliant on motor vehicles to access jobs, education and services. They also impact upon the capacity of individuals to meet family responsibilities: for example NCOSS is aware of a number of cases where carers of people with disability who have had their license suspended are no longer able to provide transport to important destinations, including medical appointments.

Many Aboriginal communities across NSW face extreme transport disadvantage, with limited access to motor vehicles and licensed drivers, and dislocation from public transport services. As a result of these limited transport options, a transport related fine can have a 'community wide' effect. NCOSS consultations have revealed that there are a number of Aboriginal communities in NSW adversely

affected by license suspensions. Frequently, there is a capacity to pay issue, and those affected may include adults who are unable to hold a license because of unpaid fines and enforcement fees for relatively minor offences committed as a young person (e.g. riding a bicycle without a helmet).

NCOSS believes that the NSW Government could implement a system in NSW that allows some Centrelink beneficiaries (such as pensioners and New Start recipients) and other low income earners to receive reductions in fine amounts for transport related infringements including non-serious traffic, parking and CityRail fines. This system would at least reduce the disproportionate fine burden faced by those on lower incomes.

It is difficult to measure the potential revenue impact of introducing a basic capacity to pay measure into NSW transport related fines. There is limited information available on the number or type of fines levied on lower income people. NCOSS estimates that approximately 90% of fines revenue is sourced from motor traffic fines. In estimating the forgone revenue for fine reductions to low income people, NCOSS has assumed that 10% of traffic fine recipients would be likely to claim a reduced fine amount.

Any shortfall in fine revenue generated by these capacity to pay measures are likely to be offset by a number of factors including a reduction in costs within the criminal justice system in the pursuit of unpaid fines and reduced costs for the State Debt Recovery Office. These measures are also likely to increase social inclusion, health and wellbeing and increased participation in education, employment and leisure activities for disadvantaged people.

Actions

- Offer a 50% reduction to Centrelink income support recipients for transport related fines relating to non-serious offences.
- Offer a reduction in fine amounts to working people with incomes less than 75% of Average Weekly Male Earnings, so that they pay 75% of the full fine.

Cost: **\$10.4m in 2009-10**

■ Recommendation 2: Community Kilometres

State Plan Priorities: R4, S1, S6, F1, F2, F3, F4, P4, P7, E3, E8

Results

- Additional community transport services created through new contracting powers associated with bus service reforms.
- Better accountability and cost effectiveness for delivery of local services.

- Additional resources to address transport disadvantage.

Evidence/Rationale

The NSW Government previously proposed a ‘community kilometres’ concept that will enable government to broker bus and driver hours at a minimal cost from local bus operators. This useful proposal will assist in meeting a range of transport needs that are currently not being addressed by existing funded programs, either due to eligibility criteria, low levels of funding or the service not existing in their area. This is especially important for rural and regional areas.

Though this creates a very useful opportunity for new services, the future potential to address transport disadvantage rests on a commitment from Government to provide appropriate levels of funding to meet costs for these new community transport services. There also needs to be the development of an effective process for community members to use community kilometres to meet local community needs. This would not only allow input into the delivery of local bus services, but also create opportunities for local NGOs, including community transport operators, to assist in the delivery of flexible community focused services in local areas.

NCOSS recommends that five pilot projects are developed – one metropolitan, one regional, two rural (large town and small town) and one remote. These pilots would be developed in close consultation with local communities and services and the funding will cover the development, implementation and evaluation of these pilots. The pilots will also identify the actual funding needed and the best brokerage model for each of these areas. These pilots should then be followed by the roll out of community kilometres across NSW.

Action

To provide recurrent funding in 2009-10 and 2010-11 for community kilometres projects in the five identified areas (metropolitan, regional, rural (large town and small town) and remote).

Cost: **\$15.6m over two years**

■ Recommendation 3: Community Transport

State Plan Priorities: R4, S1, S6, F1, F2, F3, F4, P4, P7, E3, E8

Results

- Improved capacity of community transport operators to provide services to a range of people experiencing transport disadvantage.

Despite receiving indexation, Community Transport Program funding has remained stagnant in real terms...

- Improved connectivity of people accessing and using transport services in the community.

Evidence/Rationale

Transport disadvantage is defined by a number of factors mobility, isolation and age. It is associated with both transport disadvantaged areas and transport disadvantaged groups of people.⁶⁶ Social exclusion occurs, and is exacerbated by, transport disadvantage – especially where transport disadvantaged groups of people live in transport disadvantaged areas. The Community Transport Program (CTP) aims to address transport disadvantage and the transport needs of these people.

There are 134 Community Transport providers receiving Home and Community Care (HACC) funding via the Ministry of Transport. However, not all of these programs are funded under the CTP. Over 45% of these programs do not receive CTP funding and the existing funding is inequitably distributed. This means that in many areas of NSW there is no access to community transport for people who are not eligible for HACC funded transport services. As CTP has a relatively broad focus, the program has the capacity to assist those who most need the services but are not eligible for, or are unable to use, other forms of transport. The need to address transport disadvantage experienced by Aboriginal people and young people has been consistently identified as a priority by rural and regional communities. It should also be noted that where CTP services are funded the funding is so low that operators have to reduce services.

Despite receiving indexation, Community Transport Program funding has remained stagnant in real terms, at \$2.95m in 2008-09. The last significant allocation of growth funds for the CTP program was in 1998-99.

This low level of funding is now being exacerbated by increasing fuel costs. This has a high impact on service provision in rural and remote areas where there can be extensive distances between the individual and where the service they need is provided. The impact

of rising fuel costs has recently been recognised by the NSW Government with an additional \$6.7m being given to HACC funded organisations to subsidise volunteers for the rising costs of petrol.⁶⁷ It has also been reflected in recent increases in taxi fares to allow for rising fuel costs. However, the needs of community transport programs facing similar issues have not been addressed.

Enhancement of this program would assist NGO community transport providers to meet the increasing needs of the community and to expand the range of services that they offer. It will also enable them to respond to the diverse community needs outside of traditional program areas such as HACC.

Actions

- Double the funding to existing Community Transport Program providers to enable them to meet increasing fuel costs and service demands.
- Provide additional funding to establish Community Transport Program providers in areas that currently do not have this service

Cost: An additional \$7.05m recurrent from 2009-10 to increase CTP funding to \$10m per annum

■ Recommendation 4: Transport Services for Aboriginal Communities

State Plan Priorities: R4, S1, F1, F2, F3, F4, P4, P6, P7, E3, E8

Results

- Improved availability and appropriateness of existing services for Aboriginal and Torres Strait islander communities.
- New services that reduce the social isolation of transport disadvantaged Aboriginal communities.
- Improved coordination between transport providers to meet the needs of Aboriginal people.

Evidence/Rationale

Due to a long history of social exclusion many Aboriginal and Torres Strait Islander people face geographic isolation from services and are unable to take advantage of existing services because they are not culturally appropriate. This is exacerbated by isolation from transport services and infrastructure. Poor consultation often reinforces this situation, with Aboriginal people often locked out of planning processes for transport services.

There are a number of key issues that impact upon the ability of Aboriginal people to access transport

services, including physical isolation from public transport routes, lack of flexibility of in existing services, discrimination and poor coordination of services. Affordability of services is an important issue, particularly for low income Aboriginal people. Services can be expensive, particularly for people who don't have access to concession public transport fares.

Frequently there is poor coordination between local, public and community transport providers, which can make existing services difficult to use, or fail to take opportunities to share resources in order to solve community problems. The long travelling times mean that many people who do not have access to a motor vehicle are discouraged from attending medical appointments. Better coordination of services can help to improve links to vital services.

Solving transport disadvantage in Aboriginal communities will require a concerted approach from Governments, transport operators and local communities. We must begin to acknowledge that transport issues are a key factor in understanding the barriers that face many Aboriginal people. An important starting point is to create processes for Aboriginal people to be involved in planning for future transport needs.

Actions

- \$292,000 to fund two innovative Aboriginal transport projects to improve the delivery of transport to Aboriginal people.
- \$1.4m to fund Aboriginal Regional Coordinators and local Aboriginal community based development workers, with a priority on inland areas of need.

Cost: \$1.4m recurrent from 2009-10 for Aboriginal Regional Coordinators and Community based development workers; \$292,000 in 2009-10 for the transport projects.

■ NSW Health

■ Recommendation 1: Reproductive Health

State Plan Priorities: S1, F3

Result

An improvement to women's access to information, support and appropriate counselling around pregnancy options, with a focus on increasing access to services for young women, women living in rural and remote areas, and women who experience socio-economic disadvantage.

Evidence/Rationale

The National Health and Medical Research Council⁶⁸ and other researchers⁶⁹ have recommended that counselling for pregnancy options (motherhood, adoption and termination) is available for all women seeking it in decision making, and where relevant post-abortion.

Since 2001 several factors have combined to restrict access to pregnancy termination services in NSW. These changes have included a decrease in the number of bulk-billing abortion providers, which has in turn led to an increase in the cost of termination of pregnancy. The overall outcome has been an increase in the up-front costs for a termination and an increase in the overall out-of-pocket expense of up to \$130.

In addition, since the mid-90s the proportion of pregnancy terminations conducted in NSW public hospitals has almost halved. In 2003-04, 4.8% of terminations were carried out in New South Wales public hospitals, compared to 96% of terminations in South Australia.⁷⁰ There has been some suggestion that the number of NSW public hospitals providing terminations is as little as three. This results in significantly fewer options for low-income women seeking to terminate a pregnancy.

Increasing upfront costs and difficulties obtaining a termination from public hospitals has a disproportionate affect on women who are socio-economically disadvantaged, particularly young women and women in rural and regional areas who often face additional transport costs to access termination services. It has also been recommended that local information about services for pregnancy termination be improved.⁷¹

Action

NSW Health to fund a state-wide Pregnancy Options Counselling and Support Service to provide counselling, advocacy and brokerage, and to develop and maintain a state-wide referral database and network of health care providers working in the field.

Cost: \$391, 598 recurrent

■ Recommendation 2: Provision of Appliances for Disabled People (PADP)

State Plan Priority: F2

Results

People with disability are supported to live more independently in the community, facilitating their participation in all aspects of society.

Solving transport disadvantage in Aboriginal communities will require a concerted approach from Governments, transport operators and local communities.

Evidence/Rationale

The PADP program provides equipment, aids and appliances to people with a life-long or long-term disability in order to support them to live independently in the community.

PADP is an integral part of the network of services that allows individuals to leave hospital under earlier discharge strategies and to live in the community rather than in residential facilities. The timely provision of appropriate equipment helps people to avoid future hospital admission (e.g. walking frames that prevent falls), enable community care services to provide assistance, and reduce demands on community care services by supporting people in the tasks of daily living.

The administration and resourcing of PADP has recently been the subject of review and reform. A report released in 2006 by PricewaterhouseCoopers found that there was a 'failure of the available funds to adequately satisfy the reasonable expectation of the client group'.⁷² The report also found that demand on PADP would continue to increase with estimated increases in population prevalence of disability.

Whilst there has been some additional investment in PADP, including \$11m in July 2008 to reduce the waiting list, there has been no substantial change to core or ongoing funding for the program, leaving issues such as unmet and increasing demand, long waiting lists and under-investment in the program largely unresolved beyond the short term.

Many people with disability experience substantially higher costs of living in comparison to other members of the community.⁷³ Many low income people with a disability already devote a large proportion of their weekly income to meet the costs of having a disability.⁷⁴ These higher costs generate significant hardship for low and middle income households. Given that we know that the vast majority of people with disability are likely to come from a low income household, and that the high costs of disability will adversely impact on a range of households, NCOSS believes that PADP should be an entitlement for all

people with disability, and that exclusions should only apply to *very high income earners*. Copayments for the program should also be removed on the grounds that they are prohibitive and inflict unnecessary financial hardship.

Action

That additional core funding for the PADP is provided at an amount that ensures ongoing capacity for the provision of equipments, aids and appliances to people with a life-long or long-term disability.

Cost: An additional 24.4m in 2009-10, rising to a total budget of \$100m in 2014-15⁷⁵ to meet eligible population forecasts

■ Recommendation 3: Smoking cessation support programs

State Plan Priority: S3

Result

A decrease in smoking prevalence amongst low-income and disadvantaged population groups in NSW.

Evidence/Rationale

Whilst smoking rates across the community have declined in the last decade, smoking rates for low income and disadvantaged population groups have remained higher than those for higher socioeconomic groups (26.5% compared to 15.6%).⁷⁶ Smoking rates are also higher amongst a range of vulnerable and disadvantaged groups:

- 82.1% of Aboriginal people and 77.2% of non-Aboriginal people in custody are current smokers;⁷⁷
- 51% of Aboriginal women report smoking during pregnancy;⁷⁸ and
- Between 60-80% of people with a mental illness smoke.⁷⁹

Despite the high prevalence, many people from disadvantaged groups express a desire to quit smoking. Community organisations report that the cost of cessation interventions such as Nicotine Replacement Therapy (NRT) is cited by clients as a key barrier to quit smoking. Given that a combination of NRT and counselling has been shown to be an effective intervention within these groups, and that NRT almost doubles the chances of a quit attempt being successful, NCOSS believes that increasing access to NRT for low income and disadvantaged groups will contribute to a decrease in smoking rates amongst these groups.⁸⁰

NCOSS believes that in order to implement effective smoking interventions in disadvantaged groups, interventions need to be tailored to their particular needs and circumstances. As such, with appropriate support and training NGOs are well-placed to deliver effecting smoking interventions to low-income and disadvantaged groups, given that they often have established support relationships, frequent contact and already assist their clients across a range of areas.

Actions

- The NSW Government provide funding for an additional smoking cessation trainer to work with non-government agencies to promote and implement smoking cessation support and activities with low-income and disadvantaged people.
- The NSW Government establish a fund administered by area health services for the provision of free nicotine replacement therapy to clients of non-government agencies who wish to quit smoking.

Cost: \$2m per annum

■ Recommendation 4: Public dental services

State Plan Priorities: S1, S2, F4, F5

Result

Improved oral health amongst socio-economically disadvantaged groups and increased preventive oral health treatment.

Evidence/Rationale

NSW has the lowest per capita expenditure on public dental services of all states and territories, with approximately 160,000 people currently on public dental waiting lists in NSW.⁸¹ Public dental patients suffer from poorer oral health,⁸² are less likely to receive preventive services and experience higher levels of tooth loss,⁸³ the majority of which is preventable.

In 2006 the Legislative Council's Standing Committee on Social Issues reported on dental services, finding that socio-economically disadvantaged groups bear the brunt of underfunded public dental services:

The committee notes the level of treatment that the public system is able to provide to users contrasts with the wide range of general and elective treatments provided to people who can afford to pay for services provided by private practitioners. The reduced treatment available in public dental services is affecting

the health of public dental patients, who can suffer in a range of ways from social embarrassment up to serious medical conditions and, in extreme cases, the death of patients who do not receive adequate and timely treatment.⁸⁴

The report also highlighted the particular shortages in the public dental workforce, finding that this led to reduced access to dental services, growing waiting lists, increased waiting time and a reduction in the provision of preventive care. Recent data reinforces the argument that the oral health workforce in NSW, particularly the public health workforce, requires significant enhancement:

- Only 13% of dentists in NSW work in the public sector;⁸⁵
- The number of dentists practicing as specialists in NSW is 5.2 per 100,000 population, the third lowest rate of all states and territories;⁸⁶
- NSW has the second lowest rate of dental hygienists of all states and territories, at 2.2 per 100,000 population;⁸⁷
- NSW has the lowest number of dental therapists per 100,000 population, at 3.9. This well below the national average of 7.5;⁸⁸
- The number of dental prosthetists has remained relatively stable at 4.6 per 100,000 population, however 89% of dental prosthetists work in the private sector.⁸⁹

Whilst the Commonwealth Government has committed funding to the States and Territories through the Commonwealth Dental Health Program (CDHP) and the Medicare Teen Dental Plan (MTDP), this funding alone will not resolve the significant funding and workforce challenges facing public dental services in NSW, and may in fact exacerbate demand both in the short term through the MTDP and following the expiry of the CDHP.

Actions

- Enhancement to core funding for public dental services to meet the NSW Legislative Council's that public dental funding be increased to be comparable to other states.
- Funding for a five-year strategy for comprehensive oral health workforce initiatives.

Cost: \$193.86m in 2009-10, increasing to \$252.14m plus indexation in 2013-14

Public dental patients suffer from poorer oral health, are less likely to receive preventive services and experience higher levels of tooth loss, the majority of which is preventable.

■ Recommendation 5: Health NGOs

State Plan Priorities: S1, S2, S3, F1, F3, F4, F5

Result

Increased viability and sustainability of the Health non-government organisation (NGO) sector, leading to the enhanced health and well being of the community, especially for those who are the most disadvantaged.

Evidence/Rationale

NGO Health services are a vital component of mainstream health services, in many cases providing core services that have not historically been, or would not be, provided by the public sector. Many health NGOs specifically target marginalised groups in their community who do not use mainstream health services, or do not use them until they are seriously ill. Their flexible structures and client-focused ethic make them well suited to responding to the needs of these groups.

The NSW Health NGO program receives less than 0.9% of the NSW Health Budget.

The Health NGO Sector has a broad range of strengths that include the ability to provide a cost effective service. However, over the last five years there has been a significant increase in operation costs, with figures indicating that Workcover costs alone rose by 142% from 2001-02 to 2004-05, while total insurance costs over the same period rose by 68%.⁹⁰ In addition to this, indexation levels have failed to provide for the true cost of increases in service delivery. In addition to the rise in rental and maintenance costs, NGOs have also reported increasing administrative burdens and information technology costs.

The cumulative effect of these funding shortfalls is significant. As such costs accumulate, the NGO sector's capacity to provide services to the community is reduced, with many services forced to decrease direct service delivery to cover increased costs.

Action

NSW Health increase funding to Health NGOs by 15% to meet increased core costs of service delivery

Cost: \$17.7m recurrent (indexed to CPI)

■ Recommendation 6: Transport for Health

State Plan Priorities: S1, S2, F1, F3, F5

Results

- Significant improvements in health connectivity for rural, regional and remote communities, Aboriginal communities and people on low incomes.
- A reduction in the number of people missing health appointments due to transport problems
- Improvement in survival rates and quality of life for people with potentially fatal or chronic illness by improving access to health care.
- Improved health for Aboriginal and Torres Strait Islander people.

Evidence/Rationale

The Transport for Health program is aimed at supporting Area Health Services to be more strategic in identifying, consolidating and integrating a full range of transport services and resources to increase effectiveness and reduce duplication.⁹¹ Furthermore it promotes the use of a mobility management approach to non-emergency transport by all Area Health Services, through coordination between the appointments system and transport service providers, the encouragement of closer cooperation and the development of partnerships with external service providers such as the community transport industry.

There is also funding available specifically targeting health related transport through the Transport for Health Program. Eligibility for support under this program is wider than for HACC and it is provided on the basis of a patient's inability to reasonably gain access to local health services by either public or private transport. Passengers whose trips are subsidised by Transport for Health in rural areas can be taken to regional and Sydney-based health facilities as well as local facilities. As with the HACC program, Transport for Health is based on eligibility rather than entitlement.

In rural and regional areas there are many barriers to accessing transport, which affects people's ability to seek treatment when needed. For example regionalisation of services has meant that many people who do not own a motor vehicle are likely to face significant difficulties travelling to access health services. In some areas this can mean a trip of 200

–300kms just to get to the appointment. The problem can be even greater in Aboriginal communities where it is not uncommon for people to walk or hitchhike long distances in order to attend medical appointments.

Although transport to health services is clearly a problem in rural and regional NSW, it can also be a problem in metropolitan areas. For example, consolidation of health services has increased the distance required for specialised treatment i.e. Oncology and Dialysis treatment. Poor planning for public transport to health destinations, inaccessible transport services, and limited resources for community transport all create barriers to accessing health services. Many patients resort to unaffordable forms of transport, such as taxis, in order to get to important health appointments.

Another aspect of the Transport for Health Program is the Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS). This program is designed to assist with access to specialist medical treatment and oral surgical care, for people living in isolated and rural communities. It provides a partial reimbursement of actual accommodation and travel costs. To be eligible people need to live more than 100km (one way) from where specialist medical treatment that they need is provided.

There are a number of problems relating to IPTAAS, including: the high upfront costs of the scheme, relatively high non-refundable personal contribution levels, low levels of reimbursement for accommodation costs (\$46 per night for a double and \$33 per night for a single) and fuel (15c per km), the lack of ability to elect a carer and the intensive paperwork required for each claim. In addition IPTAAS reimbursement can take up to three months. These barriers especially the upfront costs and complex paperwork means that many low income and Aboriginal people will not use the scheme.

Despite ongoing reforms of the health system in NSW, there has been little attention paid to the transport needs of patients. Despite increasing demand for access to health appointments reported by community transport providers there has been little increase in funding to health related transport services. In light of increasing fuel costs and increasing demand NSW Health needs to significantly increase funding to the Health Transport program for both transport to health and IPTAAS.

Actions

- Increase NSW Health funding for non-emergency transport services to \$10.4m per annum (as per the *No Transport No Treatment Report* released in December 2007).

- Improve monitoring and evaluation of the Transport for Health Program, especially of the number of people that are refused a service (to determine actual demand).
- Reform administration of IPTAAS in NSW to minimise paperwork and allow administration by local services.
- Reform payment processes through IPTAAS so that travel and accommodation expenses can be estimated and paid in advance.
- Ensure that travel and accommodation expenses for IPTAAS are reimbursed to the equivalent of the public service rate. These reimbursements should be adjusted by CPI each year and take account of different accommodation costs associated with staying in large rural and metropolitan centres.
- Improve affordability of IPTAAS for low income people by removing the administration fee for Health Care Card Holders, pensioners and people with demonstrable financial difficulties.
- Broaden IPTAAS to cover generalist medical appointments (not just specialists) if people live in isolated areas and especially for Aboriginal communities.

Cost: \$10.4m recurrent from 2009-10 for health related transport

(NCOSS is unable to cost the IPTAAS recommendations without access to relevant NSW Health expenditure and usage data.)

■ NSW Treasury

■ Recommendation: Indexation for NGOs

State Plan Priorities: R4, S8, P1, P6

Results

- Improved outcomes for people and communities in line with the recommendation through effective partnerships between non-government organisations (NGOs) and Government
- More effective delivery of services by NGOs on behalf of Government providing value for money.

Evidence/Rationale

The Australian Community Sector Survey 2008 shows that despite an increase in funding that demand for community services is still outstripping the sector's capacity to deliver those services.⁹² In NSW in 2006-07 respondents to the survey provided services to 422,233 people, an increase of 2% on the previous year. However, they also turned away just over 18,000 people which was a 16% increase on the previous 12 months. This was despite a 6% increase in overall funding.

While demand for services continues to exceed capacity the costs of providing these services continues to rise.

Other key findings showed that the majority of services (54%) were targeting their services more tightly than in the past to cope with the demand and that 46% had longer waiting lists than in previous years. Services had also increased the number of paid hours for staff to cope with the demand (41% of respondents) but even more agencies had increased "unfunded" hours (62% of respondents).

The overwhelming majority of respondents believed that Government funding did not cover the true cost of delivering contracted services (84%) and a significant number (32%) felt that contract requirements adversely affected their organisation's ability to deliver contracted services. This was much higher than the national figure of 24% and suggests that there is still a lot to do in NSW to truly deliver a fair and effective working partnership between the sector and Government to deliver desperately needed community services.

While demand for services continues to exceed capacity the costs of providing these services continues to rise. Wages, rent, transport and insurance costs have all continued to increase in excess of the indexation provided by Government to NGOs in recent years. The result is even further reductions in capacity to meet demand and poorer outcomes for disadvantaged people and communities. It is important that Government, in entrusting NGOs to deliver critically important services and programs on its behalf, recognises the need to ensure NGOs are both adequately funded to do this work properly and that increases in costs are met in full through indexation.

Actions

To apply full indexation based on CPI or SACS Award wage increases, whichever is the higher, to all NGOs.

Cost: Between \$52.5m (based on projected CPI of 3.5%) and \$63.75m (based on projected labour cost index of 4.25%)

■ Endnotes

- ¹ Public Interest Advocacy Centre, Protecting Human Rights in Australia, Fact Sheet 1, May 2006.
- ² Griffith G, A NSW Charter of Rights? The Continuing Debate, *Briefing Paper No 5/06*, NSW Parliamentary Library Research Service, May 2006: [www.parliament.nsw.gov.au/prod/parlment/publications.nsf/0/bd95178781b1e6b5ca25716a0006e8ef/\\$FILE/Bill%20of%20Rights%20briefing%20paper%20and%20index.pdf](http://www.parliament.nsw.gov.au/prod/parlment/publications.nsf/0/bd95178781b1e6b5ca25716a0006e8ef/$FILE/Bill%20of%20Rights%20briefing%20paper%20and%20index.pdf), viewed 7 August 2008.
- ³ Cashmore J, *Wards Leaving Care*, 1996; Create Foundation: Education Report Card 2006; Health Report Card, 2006
- ⁴ Tzioumi D, *Health problems of Children in Out of Home Care – Results from a Health Screening Clinic*, Paper given to the ACWA Conference 2006.
- ⁵ *National Evaluation of the Supported Accommodation Assistance Program (SAAP IV) final report*, Erebus Consulting Partners, May 2004.
- ⁶ NSW Auditor General, *Responding to Homelessness*, May 2007.
- ⁷ *Australia's Homeless Youth: a Report of the National Youth Commission Inquiry into Youth Homelessness*, National Youth Commission, April 2008.
- ⁸ Australian Government, *Which Way Home? A new approach to homelessness*, May 2008.
- ⁹ The NSW SAAP peaks are Homelessness NSW, the Youth Accommodation Association and the Women's Refuge Resource Centre. The joint call for the strategy was first submitted to the NSW Government in September 2006 in response to the draft NSW State Plan.
- ¹⁰ Department Ageing, Disability and Home Care, *Future Directions 2004*.
- ¹¹ Productivity Commission, *Report on Government Services 2008*, Table 14A.25
- ¹² Productivity Commission, *Report on Government Services 2007*, Chapter 12.
- ¹³ 1:4 A Report to the Minister for Community Services on the implementation of a 1:4 staff: child ratio for children aged under two years in NSW children's services, p.5
- ¹⁴ Since the Task Force report was released, a group of early childhood experts convened by the Academy of Social Sciences in Australia has released Ten Policy principles for a National System of Early childhood Education and Care that advocates for standards that reflect a ratio of 'at least 1 adult to 3 children for infants (1:3); at least one adult to four children for one to two year olds'. Policy Paper Summary, September 2006.
- ¹⁵ Department of Community Services, *Child Protection Quarterly Data*, July 2005-March 2007
- ¹⁶ Australian Institute of Health and Welfare, *Child Protection Australia 2005-2006*, table 3.7 p.41, www.aihw.gov.au.
- ¹⁷ McCain MN & Mustard JF, The early years study three years later: From early child development to human development, Toronto: The Founders Network cited in *Prevention and Early Intervention Literature Review*, 2002, NSW Department of Community Services, www.community.gov.au
- ¹⁸ Giedd JN, Blumenthal J, Jeffries NO, et al. Brain development during childhood and adolescence: a longitudinal MRI study. *Nature Neuroscience*, 1999; 2(10): 861-3 and Rapoport JL, Giedd JN, Blumenthal J, et al. Progressive cortical change during adolescence in childhood-onset schizophrenia. A longitudinal magnetic resonance imaging study. *Archives of General Psychiatry*, 1999; 56(7): 649-54. and Frontline Inside the Teen Brain Interview with Deborah Yurgelun-Todd: www.pbs.org/wgbh/pages/frontline/shows/teenbrain/interviews/todd.html%3Cbr%3E
- ¹⁹ Mission Australia National Survey of Young Australians 2006, key and emerging issues, p.31
- ²⁰ Kids Helpline New South Wales, Highlights from 2006 pp1-5, www.kidshelp.com.au
- ²¹ New South Wales Parliament Legislative Council, *Select Committee on the Increase in the Prisoner Population, Final Report - November 2001*, p xii.
- ²² Grunseit A, Forell S and McCarron E, *Taking justice into custody: The legal needs of prisoners, Access to Justice and Legal Needs*, Vol 5, Law and Justice Foundation of NSW, July 2008.
- ²³ Marien M and Hickey J, *Crisis in Bail and Remand*, Institute of Criminology Seminar, 29 May 2002, http://www.lawlink.nsw.gov.au/lawlink/clrd/ll_clrd.nsf/pages/CLRD_bail2002, viewed 8 August 2008.
- ²⁴ Johns R, *Bail Law and Practice: Recent Developments*, NSW Parliamentary Library Research Service, Briefing Paper No 15/02, December 2002.
- ²⁵ NSW Parliament, Legislative Council, Select Committee on the Increase in the Prisoner Population, *Interim Report: Issues Relating to Women*, July 2000, para 6.42
- ²⁶ Grunseit A, Forell S and McCarron E, *Taking justice into custody*, p.18.

- ²⁷ Drabsch T, *Reducing the Risk of Recidivism*, NSW Parliamentary Library Research Service, Briefing Paper No 15/06, November 2006, p.57.
- ²⁸ Drabsch T, *Reducing the Risk of Recidivism*, pp. 56 & 59.
- ²⁹ Grunseit A, Forell S and McCarron E, *Taking justice into custody*, p.13.
- ³⁰ Grunseit A, Forell S and McCarron E, *Taking justice into custody*, p.19.
- ³¹ Grunseit A, Forell S and McCarron E, *Taking justice into custody*, p.18.
- ³² Auditor General of NSW, *Performance Audit: Prisoner Rehabilitation – Department of Corrective Services*, May 2006, www.audit.nsw.gov.au/publications/reports/performance/2006/prisoner/prisoner_rehabilitation.pdf, viewed 8 August 2008, p17.
- ³³ NSW Premier's Department, Office for Women's Policy, *Women, Violence and Safety NSW*, February 2007, www.women.nsw.gov.au/PDF/FS2007/Women,%20Violence%20and%20Safety_OFW%202007.pdf, viewed 7 August 2008.
- ³⁴ *ibid*
- ³⁵ *ibid*
- ³⁶ *ibid*
- ³⁷ Cairns Regional Domestic Violence Services, *Newsletter*, Issue 1, April 2005, www.dvcairns.org/public/newsletter1.pdf, viewed 7 August 2008.
- ³⁸ Stewart J, Literature review on the establishment of domestic violence fatality review teams, *Australian Domestic and Family Violence Clearinghouse Newsletter*, No. 21, April 2005, p2.
- ³⁹ NSW Ombudsman, *Domestic Violence: improving police practice*, A special report to parliament under s31 of the Ombudsman's Act 1974, December 2006, p.81.
- ⁴⁰ People J, *Trends and patterns in domestic violence assaults*, NSW Bureau of Crime Statistics and Research, Crime and Justice Bulletin, No 89, October 2005.
- ⁴¹ NSW Bureau of Crime Statistics and Research, *Some important facts about sexual assault in Australia*, August 2007, www.bocsar.nsw.gov.au/lawlink/bocsar/ll_bocsar.nsf/pages/bocsar_facts_sexual_assault, viewed 27 August 2008.
- ⁴² *ibid*
- ⁴³ NSW Bureau of Crime Statistics and Research, *Increase in the Conviction Rate for Sexual offences in NSW Courts*, September 2007, [www.bocsar.nsw.gov.au/lawlink/bocsar/ll_bocsar.nsf/vwFiles/Sexual_offence_Information_sheet_06.pdf/\\$file/Sexual_offence_Information_sheet_06.pdf](http://www.bocsar.nsw.gov.au/lawlink/bocsar/ll_bocsar.nsf/vwFiles/Sexual_offence_Information_sheet_06.pdf/$file/Sexual_offence_Information_sheet_06.pdf), viewed 27 August 2008.
- ⁴⁴ Marcus G, An integrated response to family violence – a new approach in Victoria, *Australian Domestic and Family Violence Clearing House, Newsletter* No. 32, April 2008.
- ⁴⁵ Marcus G, An integrated response to family violence – a new approach in Victoria, April 2008.
- ⁴⁶ Australian Services Union, *Building Social Inclusion in Australia, priorities for the social and community services sector workforce*, September 2007
- ⁴⁷ Council on the Ageing, *Working in Community Aged Care: Growth or Crisis? Summary of the Community Care Workforce Forum*, December 2006
- ⁴⁸ Council of Social Service of New South Wales, *Sharing Financial Administration: A Feasibility Study of Potential Models for Small Non-Government Organisations*, 2007.
- ⁴⁹ NCOSS, *Community Connexions: Addressing the IT Needs of the Sector* (in press) 2008.
- ⁵⁰ *ibid*
- ⁵¹ Australian Bureau of Statistics (2008) *Labour Force Australia* ABS Cat no 6202.0.
- ⁵² Australian Bureau of Statistics (2007) *Australian Labour Market Statistics* Cat No 6105.0
- ⁵³ Data from Judith Yates and Michael Gabriel: *Housing affordability in Australia*, background report, AHURI, February 2006. Housing stress is defined as spending 30% or more of gross household income on housing costs.
- ⁵⁴ See references to housing in the communiqués from the COAG meetings of 20 December 2007, 26 March 2008 and 3 July 2008, available online at www.coag.gov.au/coag_meeting_outcomes/issues_by_subject.cfm COAG is due to consider the draft NAHA text at its 2 October 2008 meeting in Perth and finalise the financial arrangements for the new intergovernmental agreement on financial relations at its December meeting.
- ⁵⁵ These include the National Rental Affordability Scheme (NRAS), Home Saver Accounts, infrastructure funding and e-planning initiatives under the Housing Affordability Fund, and additional housing for the homeless under A Place to Call Home initiative.

⁵⁶ Previously known as the Debt Equity Affordable Housing Program.

⁵⁷ There are already agreements or contributions in place for the former ADI site, Sydney Olympic Park, Redfern Waterloo strategic sites and the former CUB brewery sites. Other proposals are in the pipeline.

⁵⁸ Such as Housing NSW owned land in Villawood (Kamira Court), North Riverwood and Glebe (jointly with Sydney City Council). NCOSS believes there are other potential projects of this kind that could be readily identified.

⁵⁹ Such as the proposal NCOSS put forward in its earlier Pre Budget Submissions for the removal of stamp duty on the purchase price of investment rental properties where the purchaser agrees to lease the dwelling to a community housing association for a period of at least 10 years.

⁶⁰ Including Landcom, the Redfern Waterloo Authority, the Sydney Olympic Park Authority and the Sydney Harbour Foreshores Authority.

⁶¹ The Federal Government has undertaken to provide sufficient incentives to enable 50,000 NRAS dwellings to be funded by June 2012. It has said that a further 50,000 incentives will be available from 2012 if market demand remains strong. NCOSS calculations assume that NSW receives around one third of available NRAS incentives between now and June 2012. As incentives are provided via a competitive tender process, there is no guarantee that this will occur.

⁶² Taken from *Shared Access Trials Monitoring and Evaluation Framework*, Department of Housing, April 2007 p. 4.

⁶³ See Robert Mowbray and Nicholas Warren: *Shared equity home-ownership: welfare and consumer protection issues*, Shelter NSW, July 2007.

⁶⁴ For details of home purchase assistance measures in other States and Territories see *Home purchase assistance 2006-07: Commonwealth State Housing Agreement national data report*, Australian Institute of Health and Welfare, April 2008, table 2 p.11. During 2006-07 shared equity programs were operated by the Northern Territory, South Australian and Western Australian Governments. Other proposals have been announced but not yet commenced.

⁶⁵ See Robert Mowbray and Nicholas Warren: *Shared equity home-ownership: welfare and consumer protection issues*, Shelter NSW, July 2007.

⁶⁶ Hurni A, *Transport and Social Disadvantage in Western Sydney: a partnership research project*, University of Western Sydney and Western Sydney Community Forum, November 2006, p.17.

⁶⁷ *Petrol subsidy boost to help volunteers: lemma*, Premier of NSW, News Release, August 5, 2008.

⁶⁸ National Health and Medical Research Council, *Information paper on Termination of Pregnancy in Australia*, 1996

⁶⁹ Ryan et al, *We Women Decide*, 1994

⁷⁰ Senate Hansard, Questions on Notice: Abortion, 4 October 2005

⁷¹ National Health and Medical Research Council, *Information paper on Termination of Pregnancy in Australia*, 1996

⁷² Pricewaterhouse Coopers, *Review of the program of appliances for disabled people*, June 2006

⁷³ See Peter Saunders, "Disability, Poverty and Living Standards: Reviewing Australian Evidence and Policies," Discussion Paper 145, Social Policy Research Centre, 2005 and Physical Disability Council of Australia, *Towards a Disability Allowance: Offsetting the Costs of Disability*, 2001.

⁷⁴ Diamond M, "Counting the Costs of Blindness: Lessons for a Cost of Disability Allowance," Paper presented at Australian Social Policy Conference, University of NSW, July 2003

⁷⁵ Based on figures calculated by Pricewaterhouse Coopers, Review of the program of appliances for disabled people, June 2006

⁷⁶ NSW Health, "Socioeconomic status and smoking", *Report of the NSW Chief Health Officer*, www.health.nsw.gov.au/public-health/chorep/ses/ses_smo_ses.htm, viewed 12 August 2008.

⁷⁷ NSW Health, "Aboriginal and Torres Strait Islander Peoples - Health risk factors in offenders in custody", *Report of the NSW Chief Health Officer*, www.health.nsw.gov.au/public-health/chorep/atsi/atsi_riskprev_type_prsatsi.htm, viewed 12 August 2008.

⁷⁸ Australian Institute of Health and Welfare, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, 2008, www.aihw.gov.au/publications/ihw/hwaatsip08/hwaatsip08.pdf, viewed 12 August 2008.

⁷⁹ Cancer Council NSW, *Budget Initiatives for Cancer Control – NSW State Budget 2008/09*, October 2007

⁸⁰ Cancer Council NSW, *Addressing smoking in community service organisations: a policy toolkit*, 2008

⁸¹ NSW Health, *Public Oral Health Services – NSW Oral Health Service Waiting List for Ambulatory Care*, June/July 2007, www.health.nsw.gov.au/cohs/list_flow.asp, viewed 12 August 2008.

⁸² Australian Institute of Health and Welfare, *Public dental patients have fewer teeth, more cavities*, Media Release, 7 August 2008, www.aihw.gov.au/mediacentre/2008/mr20080807.cfm viewed 12 August 2008.

⁸³ Australian Institute of Health and Welfare, *Dental Service patterns by patient and visit characteristics*, AIHW dental statistics and research unit research report no. 32, 2007, www.arcpoh.adelaide.edu.au/publications/report/research/pdf_files/rr32_patterns_characteristics.pdf, viewed 12 August 2008.

⁸⁴ NSW Parliament Legislative Council, Standing Committee on Social Issues, *Dental Services in NSW*, Report 37, 2006

⁸⁵ Australian Institute of Health and Welfare, *Dental Labour force in Australia 2005*, August 2008

⁸⁶ *ibid*

⁸⁷ Australian Institute of Health and Welfare, *Dental hygienist labour force in Australia 2005*, AIHW dental statistics and research unit research report no. 34, 2008, www.arcpoh.adelaide.edu.au/publications/report/research/pdf_files/rr34_Hygiene%202005.pdf, viewed 12 August 2008.

⁸⁸ Australian Institute of Health and Welfare, *Dental therapist labour force in Australia 2005*, AIHW dental statistics and research unit research report no. 35, 2008, www.arcpoh.adelaide.edu.au/publications/report/research/pdf_files/rr35_Therapist%202005.pdf, viewed 12 August 2008.

⁸⁹ Australian Institute of Health and Welfare, *Dental prosthetist labour force in Australia 2005*, AIHW dental statistics and research unit research report no. 37, 2008, www.arcpoh.adelaide.edu.au/publications/report/research/pdf_files/rr37_Prosthetists%202005.pdf viewed 12 August 2008.

⁹⁰ Council of Social Service of NSW, *NSW Funding Indexation for Non-Government Organisations: Options Paper*, 2005

⁹¹ Transport for Health includes the Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS); the Health Related Transport Program, Inter-facility transport (non-Ambulance); Statewide Infant Screening-Hearing Program and services funded under the former Transport For Health Program

⁹² Australian Council of Social Service, *Australian Community Sector Survey Report 2008*, ACOSS Paper 154, June 2008.

Appendix 1

STATE PLAN PRIORITIES

State Plan Goals & Priorities

NCOSS PBS Recommendations

		RIGHTS, RESPECT & RESPONSIBILITY				DELIVERING BETTER SERVICES							
		Keeping people safe		Building harmonious communities		Healthy communities			Students fulfil their potential		A high quality transport system		Customer friendly services
		Reduced rates of crime, particularly violent crime	Reduced rates of re-offending	Reduced levels of anti-social behaviour	Increased community participation and integration in community activities	Improved access to quality healthcare	Improve survival rates and quality of life for people with potentially fatal or chronic illness through improvements in health care	Improved health through reduced obesity, smoking, illicit drug use and risk drinking	Increasing share of peak hour journeys on a safe and reliable public transport system	More students complete Year 12 or recognised vocational training	Increasing levels of attainment for all students	Safer roads	Increased customer satisfaction with all Government services
		R1	R2	R3	R4	S1	S2	S3	S4	S5	S6	S7	S8
A-G'S ¹	A Charter of Human Rights in NSW		■		■	■							
CROSS AGENCY	Guarantee for Kids in Care					■			■	■			
	Improving services for people who are homeless ²		■										
AGEING, DISABILITY & HOME CARE	Home and Community Care												
	Seniors Card for Aboriginal People				■								
	Accommodation options for people with disability				■								
	Individualised Packages to support people with disability				■								
	Parity for the Post School Options Programs												
	Towards 2030 Priorities for Older People				■								
COMMUNITY SERVICES	Children's Services Regulation: Staff ratios												
	Community Services Grants Program (CSGP)	■		■	■								
	Children's Services: Early Childhood Teachers												
	Early Intervention for 9-17 year olds	■		■	■			■	■	■			
CORRECTIVE SERVICES	Bail hostels	■	■		■								
	Post-release programs	■	■		■					■			
	Rehabilitation programs	■	■		■					■			
PREM ³	Domestic Violence Homicide Review Team	■											
	NSW Violence Against Women Strategic Framework	■		■		■							
PREM ³ (HUMAN SERVICES CEOs)	An Industry Development Plan for the NSW non-government human services sector				■								■
	Regional Service 'Hubs'												■
	Increased Management Support and Research Capacity												■
	Implementation of an IT Strategy for the Human Services NGO Sector (HSNet)												■
WATER & ENERGY	Rebates for low income earners in NSW												
	No-interest loans for energy efficient products												
	Temperature Control Energy Rebates for People with Chronic Illness												

FAIRNESS & OPPORTUNITY							GROWING PROSPERITY ACROSS NSW					ENVIRONMENT FOR LIVING																										
Strengthen Aboriginal communities		Opportunities and support for the most vulnerable		Early intervention to tackle disadvantage			NSW: Open for Business		Stronger rural and regional economies			Securing supply of water and energy		Practical environmental solutions		Improved urban environments																						
Improved health and education for Aboriginal people		Increased employment and community participation for people with disabilities		Improved outcomes in mental health		Embedding the principle of prevention and early intervention into Government service delivery in NSW			Reduced avoidable hospital admission		Increased proportion of children with skills for life and learning at school entry			Reduced rates of child abuse and neglect		Increased business investment		Maintain and invest in infrastructure		More people participating in education and training throughout their life			Increased business investment in rural and regional NSW		Better access to training in rural and regional NSW to support local economies		A secure and sustainable water supply for all users		A reliable electricity supply with increased use of renewable energy		Cleaner air and progress on greenhouse gas reductions		Better environmental outcomes for native vegetation, biodiversity, land, rivers and coastal waterways		Housing affordability		More people using parks, sporting and recreational facilities, and participating in the arts and cultural activities	
F1	F2	F3	F4	F5	F6	F7	P1	P2	P4	P6	P7	E1	E2	E3	E4	E6	E8																					
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(Appendix 1 continued)

State Plan Goals & Priorities

		RIGHTS, RESPECT & RESPONSIBILITY				DELIVERING BETTER SERVICES							
		Keeping people safe		Building harmonious communities		Healthy communities			Students fulfil their potential		A high quality transport system		Customer friendly services
		Reduced rates of crime, particularly violent crime	Reduced rates of re-offending	Reduced levels of anti-social behaviour	Increased community participation and integration in community activities	Improved access to quality healthcare	Improve survival rates and quality of life for people with potentially fatal or chronic illness through improvements in health care	Improved health through reduced obesity, smoking, illicit drug use and risk drinking	Increasing share of peak hour journeys on a safe and reliable public transport system	More students complete Year 12 or recognised vocational training	Increasing levels of attainment for all students	Safer roads	Increased customer satisfaction with all Government services
		R1	R2	R3	R4	S1	S2	S3	S4	S5	S6	S7	S8
HOUSING	Increased supply of affordable rental housing												
	Better linking housing and support services		■										
	Shared equity scheme for social housing tenants				■								
LEGAL AID	Community Legal Centres	■	■		■								
	Women's Domestic Violence Court Assistance Program	■	■										
TRANSPORT	Capacity to pay transport related fines		■		■	■							
	Community kilometres				■	■					■		
	Community Transport Program				■	■					■		
	Transport Services for Aboriginal Communities				■	■							
NSW HEALTH	Reproductive Health					■							
	Provision of Aids to Disabled People (PADP)												
	Smoking cessation support programs							■					
	Public dental services					■	■						
	Health NGOs					■	■	■					
	Transport for Health					■	■						
TREAS ⁴	Indexation for NGOs				■								■

Endnotes

¹ A-G'S - Attorney-General's Department

² NCOSS believes that improved outcomes for people who are homeless must become a separate priority item in the

³ PREM - Department of Premier and Cabinet

⁴ TREAS - NSW Treasury

Please note: Priorities P3 (Cutting red tape); P5 (AAA rating maintained); E5 (Jobs closer to home); and E7 (Improve the efficiency of the road network) are not included in the above table

FAIRNESS & OPPORTUNITY							GROWING PROSPERITY ACROSS NSW					ENVIRONMENT FOR LIVING																										
Strengthen Aboriginal communities		Opportunities and support for the most vulnerable		Early intervention to tackle disadvantage			NSW: Open for Business		Stronger rural and regional economies			Securing supply of water and energy		Practical environmental solutions		Improved urban environments																						
Improved health and education for Aboriginal people		Increased employment and community participation for people with disabilities		Improved outcomes in mental health		Embedding the principle of prevention and early intervention into Government service delivery in NSW			Reduced avoidable hospital admission		Increased proportion of children with skills for life and learning at school entry			Reduced rates of child abuse and neglect		Increased business investment		Maintain and invest in infrastructure		More people participating in education and training throughout their life			Increased business investment in rural and regional NSW		Better access to training in rural and regional NSW to support local economies		A secure and sustainable water supply for all users		A reliable electricity supply with increased use of renewable energy		Cleaner air and progress on greenhouse gas reductions		Better environmental outcomes for native vegetation, biodiversity, land, rivers and coastal waterways		Housing affordability		More people using parks, sporting and recreational facilities, and participating in the arts and cultural activities	
F1	F2	F3	F4	F5	F6	F7	P1	P2	P4	P6	P7	E1	E2	E3	E4	E6	E8																					
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